



05. - 09. 03. 2008

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# Application for the use of pyrotechnics

Venue	Stand No./Room
Exhibitor	

## Request 2008

**Messe Berlin, ST21:** Fax: +49(0)30/30 38-28 98  
**Post:** Messe Berlin GmbH, Service + Technik, Messedamm 22, 14055 Berlin  
**For queries:** **Exhibition Grounds, ICC and Palais:**  
**Phone:** +49(0)30/30 38-38 35; **E-Mail:** kalkusschumann@messe-berlin.de

**Application deadline: 06. 02. 2008**

- Person(s)** responsible for letting off the special effects .....  
Name and address: .....  
Number and date of the approval issued in accordance with § 7 SprengG .....  
Issuing authority: .....  
Number and date of certificate of competency in accordance with § 20 SprengG: .....  
Name and address: .....  
Issuing authority: .....
- Date and time** at which the special effects are to be let off: .....
- Place** (Hall/room/site): .....  
Occasion: .....  
Organizer: .....

**We wish to arrange an appointment for a demonstration of the intended special effects, for technical safety purposes**

on: ..... at: ..... a.m/p.m., because by this time the work of setting up should sufficiently advanced to allow a realistic demonstration.

If you do not consider such a demonstration necessary, please notify us in writing.

- Type and extent** of the intended special pyrotechnical effects: .....  
Quantity/designation: ..... duration/height: ..... category: .....  
.....  
.....

If necessary, enclose a supplementary list of details:  
(a printed supplement form may be obtained from Messe Berlin GmbH, ST 22  
Phone: +49(0)30/30 38-38 35, fax: +49(0)30/30 38 38 38)

The organizer is required to make the following safety arrangements:

- a minimum of ..... fire extinguishers
- a team of firefighters commensurate with the size of the event (theatre firefighters)
- from the relevant fire brigade
- maintenance of clear emergency exits and free access for the fire brigade.

**Please note: For later alteration of invoices EUR 30.00 plus VAT will be charged in addition.**

- Name and address of exhibitor (if recipient of invoice): .....
- Name and address of recipient of invoice (if not identical with exhibitor): .....

Contact on the stand: ..... Phone: ..... Telefax: .....

E-Mail: .....

- We are only ordering by order and on account of the exhibitor (services will be charged to the exhibitor).

Date: ..... Name of the customer (in block letters): .....

Legally binding signature and company stamp:

As of: May 2007 / Subject to alteration / Legal venue and place of jurisdiction is Berlin-Charlottenburg

Messe Berlin – Contractual partner: Messe Berlin GmbH