

# Installation of Compressed Gas Cylinders (no propane allowed)

Hall	Stand No.
Exhibitor	

## Request 2008

**Messe Berlin, ST21:** Fax: +49(0)30/30 38-28 42  
**Post:** Messe Berlin GmbH, Service + Technik, Messedamm 22, 14055 Berlin  
**For queries:** **Phone:** +49(0)30/30 38-28 38  
**E-Mail:** bromke@messe-berlin.de

**Application deadline: 15. 08. 2008**

For approval of installation of compressed gas cylinders please fill in the below listed questionnaire

Period of usage: .....

Type of compressed gas used: .....

Type of usage: .....

Location of cylinders on stand: .....

.....

.....

Daily requirements: Number of cylinders: ..... qty.

Contents of cylinders: ..... kg resp. l  
 Will the compressed gas be supplied via piping?  yes  no over a distance of ..... m in ..... pipes

Are stop valves installed? automatic/manual  yes  no

Are stop valves marked?  yes  no

Are fire extinguishers available? automatic extinguishers  yes  no

portable extinguishers  yes  no ..... nos. with powder filling/with CO<sub>2</sub> filling

Proof of last pressure test .....

The pertinent instructions for the use of the compressed gas cylinder units are available at the location of the exhibition.

Messe Berlin will schedule the official dates for inspection and will inform the exhibitor accordingly (please see C 1 Technical Guidelines, item 5.7)

**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):

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

Legally binding signature and company stamp: