



## EQUIPMENT INSTALLATION FORM

Return **before 05/22/ 2009**  
by fax +33 (0)1 53 30 95 29 or mail [gcreston@comexposium.com](mailto:gcreston@comexposium.com)

COMPANY: \_\_\_\_\_ STAND No: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### SETTING UP

◆ Expected arrival: 06/ \_\_\_\_/2009                      ◆ Expected time: \_\_\_\_\_

◆ Number of lorries: \_\_\_\_\_                      ◆ Number of machines: \_\_\_\_\_

◆ Process duration: \_\_\_\_\_

◆ Type of exhibited machines:  
 \_\_\_\_\_  
 \_\_\_\_\_

◆ Volume (Weight, height, width, m<sup>3</sup>...):  
 \_\_\_\_\_  
 \_\_\_\_\_

◆ Type of handling (crane, fork-lift truck...):  
 \_\_\_\_\_  
 \_\_\_\_\_

◆ Name and address of the packer:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### DISMANTLING

◆ Expected arrival: 06/ \_\_\_\_/2009                      ◆ Expected time: \_\_\_\_\_

◆ Process duration: \_\_\_\_\_

◆ Type of handling (crane, fork-lift truck...):  
 \_\_\_\_\_  
 \_\_\_\_\_

