

Form 9

Stand Dilapidation Compulsory for Space Only Exhibitors				Y SUMMIT	ENERGY			
RETURN DETAILS		LS	IIBITOR DETAI	EXHII				
Stand No. Please hand over this form to the floor manager onsite on the last day of the	Stand No.				Company Name			
Address breakdown.								
For inquiries, please contact								
For inquiries, please contact Operations Department		Country	Post Code	PO Box	City			
RX Middle East		,	Position	,	Contact Name:			
Email		Fax		Mobile	Tel.			
Print		Date		Signature	Email			
This is to certify that we are officially handing over the space mentioned below. We understand that the Organizers will initiate claims for any damage caused.								
rte / 2026	Date	Hand Over			Hall & Stand No.			
REMARKS ON HAND-OVER								
Estimated Cost		Condition of space and details of any damages						
ntioned below. We understand that the Organizers will in		r the space r Hand Over	tails of any da	that we are officially nage caused. HAND-OVER	This is to certify to claims for any dam Hall & Stand No. REMARKS ON I			

REMARKS ON HAND-OVER	
Condition of space and details of any damages	Estimated Cost
(to be filled by Reed Exhibitions representative)	
For Exhibitor/Contractor	Reed Exhibitions Representative
Name:	Name:
Signature:	Position:
Contractors Company:	Signature:
Date:	Date:

Undertaking: We accept responsibility for any damage caused to the existing structures, finishes and fixtures. We also agree to abide by the regulations stated in the exhibitor's manual issued by the Organizers, details of which are in our possession.

For official use	
Remarks:	
Name:	