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PIsland Booth Configuration
Form Due April 8

⊠he Island Booth Configuration Form is required for any Island booth 400 square feet or larger. **Return no later than April 8, 2022 to** <u>al@iddba.org</u>. Any island booth not receiving prior acceptance will not be allowed to set up until it is accepted by IDDBA.

Exhibiting Company:		
Exhibitor Appointed Contractor (setu	p & teardown at show site) <u>EAC Noti</u>	fication Form is required:
Contact Name:		
Address:		
CityState/Country:		Zip/Postal Code:
Email:		Phone:
Design Company (designed the booth) <u>EAC Notification Form</u> is required i	if they will be at show site:
Contact Name:		
Address:		
CityState/Country:		Zip/Postal Code:
Email:		Phone:
Booth Information:		
Booth Number:		Booth Size:
Height at the tallest point of the booth	layout:	
Is it a multi-level booth? No	Yes	What is the certified maximum occupant load for the second story?
Describe booth:		

Materials used in construction of booth:

What type of light fixtures will be used, if any? What type of light bulb (incandescent, LED, halogen, etc.) will be used? Where will they be placed?

I have enclosed the following required items: (Be sure all are included/checked before submitting.)

 \Box Rendering (sketch or picture of detailed side views, including height/width/dimensions).

 \Box Footprint drawing (top-down line drawing of sign, including dimensions).

An original scaled blueprint of the plan with original registered engineer signature and original engineer stamp (3 copies are required for two-story booths only), and be accompanied by a letter from the engineer or architect stating that the booth conforms to the current Uniform Building Code. Blueprint must also include the exhibitors name, booth #, directional information (i.e., neighboring booths), maximum height, the show name and dates.
Øhe exact positioning of the booth in relation to surrounding booths, including measurements.

If you have any questions, e-mail al@iddba.org or call the Exhibits Team at 608-310-5000.

For IDDBA Use Only Approved:___

Date: