


**EXHIBITION FOR PRINTING & PACKAGING
PRINTING TECHNOLOGIES**

 Euroexpo Fairs Srl | J40/8828/2014 | CUI 33423058
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ROMEXPO SA

All2Print Show
30 SEPTEMBER - 3 OCTOBER 2025
ROMEXPO

<input type="text"/>	<input type="text"/>
Company	Phone
<input type="text"/>	<input type="text"/>
Address	Mobile (of the contact person)
<input type="text"/>	<input type="text"/>
ZIP Code; City	Fax
<input type="text"/>	<input type="text"/>
Country	E-mail
<input type="text"/>	<input type="text"/>
Contact person	VAT no. / Registration no.

ORDER: RENTING COMPRESSED AIR

We order according with the items checked below and we also accept the Special Conditions in the Application Contract and the General & Technical Conditions of the Fairs and Exhibitions organized within ROMEXPO Exhibition Centre.

Code	Quantity	Description	Tariff (EURO)
019 010 370 000	<input type="text"/>	Mobile electric air compressor (V = max. 50 l, Q= max. 50 l/min., P= max. 8 bars)	10 Euro/hour
019 010 370 015	<input type="text"/>	Compressed air branching in Hall B1, B2 (incl. consumption)	325 Euro/event
019 010 370 020	<input type="text"/>	Compressed air supply in pav. B1, B2 before and after the event* (incl. consumption)	92.5 Euro/day

*event = last day of stand construction / development + fair / exhibition period + first day of dismantling

To all tariffs VAT should be added.

Fill in, please, the following information:

Air flow requested (l/min) /connection point
 Minimum pressure requested (bar) / connection point
 Date of starting the comp. air supply
 Date of ending the comp. air supply

The compressed air distribution network in pavilions B1 and B2 has the following characteristics:

- >flow rate up to 500 l/min for a connection;
- >connections points of 1/2 " in each pavilion.

For flow rate requests higher than 500 l/min, additional technical details are needed.

Mobile electric air compressor request, during stand construction

☐ YES ☐ NO

Mobile electric air compressor request, during stand dismantling

☐ YES ☐ NO

Requested
installation date:
(if possible)

Order date

EXHIBITOR/COMPANY

Legal representative

Name Surname: _____

Signature

CompanyPhoneAddressMobile (of the contact person)ZIP Code; CityFaxCountryE-mailContact personVAT no. / Registration no.

ORDER: COMPRESSED AIR RENTING

Neighbor stand no.Neighbor stand noNeighbour stand noNeighbor stand no.

4 sides open
stand

[illegible]Scale