



Early installation/Extended dismantling

Event: _____ Stand number: _____

Company: _____ Contact person (Company): _____ Tel (Company): _____

Fax (Company): _____ Email (Company): _____

Stand builder: _____ Contact person (Stand builder): _____ Tel (Stand builder): _____

Fax (Stand builder): _____ Email (Stand builder): _____

Description of work _____

Requested moving in date: _____ Time: _____

Debits: Stand owner Stand builder

I agree to and have read the terms and condition stated on www.stockholmsmassan.se

Date: _____ Signature: _____

Welcome to Stockholmsmässan!

Granted moving in date: _____ Time: _____ Time: _____

Approved by Stockholmsmässan: _____

Send the application by email earliermovingin@stockholmsmassan.se or fax +46 8 749 42 21