PRIVATELY OWNED VEHICLE (POV) FLAT CART SERVICE

Hargrove, Inc. is offering a special service for exhibitors who wish to deliver their exhibit materials in their privately owned vehicle (POV) directly to show site on the days of exhibitor setup. The following information does **not** apply to rental vehicles, step vans, box trucks, trailers or any commercial carrier. This service is strictly for the exhibitors who wish to transport their own materials in their own vehicle (i.e., car, pickup truck, minivan or sports utility vehicle).

A flat cart load is defined as:

- items that will safely fit on the 3' x 5' surface of a flat cart – stacked no higher than the top of the cart's push handle, *and*
- a shipment that can be unloaded/reloaded within 15 minutes*.

Flat Cart Service - $109 per Cart Load

Service will be available:

Thursday, April 26	10:00 AM to 4:00 PM
Friday, April 27	5:00 AM to 7:30 AM
	3:30 PM to 6:00 PM

* A $50 per ½-hour charge will apply after 15 minutes.

Once you have arrived at the loading dock at the Walter E. Washington Convention Center, a teamster will be assigned to assist you with the unloading and deliver of your materials to your booth. Your vehicle must be removed from the unloading area within 15 minutes after arrival. Any unattended vehicles may be towed at the owner's expense. Hargrove's Limits of Liability apply to POV/Flat Cart Service.

SPECIAL NOTE: You must fill out a Bill of Lading at the close of the show before reloading. *All items leaving the exhibit hall must have a completed Bill of Lading.* Forms will be available at the Hargrove Service Center and must be returned to the service desk for validation.

Advance payment authorization is required for this service; credit card will not be charged until service is rendered.

- I will arrive at the convention center on: Thursday, April 26 at approximately _____ AM /PM
  Friday, April 27 at approximately _____ AM /PM
- My vehicle is a: ☐ Car ☐ Van ☐ Pickup ☐ Sport/Utility Vehicle Color: _____
- I will also require outbound service: ☐ Yes ☐ No

Order Payment Method:

☐ Check Enclosed # _____ Dated ___/___/___ (Ref: 5028068CT) ***OR*** ☐ Charge the following credit card:

☐ Visa ☐ MasterCard ☐ Discover Card ☐ American Express

Credit Card Number:

																Exp.

CARDHOLDER: _____ SIGNATURE: _____

COMPANY: _____ BOOTH #: _____

ADDRESS: _____ PHONE #: _____

CITY: _____ ST/ZIP: _____ FAX: #: _____

CONTACT: _____ EMAIL: _____

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