

## **TELEPHONE & CABLE TV SERVICE CONTRACT**



## HYATT REGENCY SANTA CLARA

Exhibitor Company Name:  Booth/Room#: Show Name:								
Billing Company Name:		Show Start I	Show Start Date:		Show End Date:			
Billing Company Address:			Show Name:  Show Start Date:  Show End Date:  INCENTIVE ORDER DEADLINE:  14 DAYS PRIOR TO 1ST DAY OF SHOW MOVE-IN  On-site Authorized Contact:  On-site Cell Number:  Contact Email:  Cell Number:					
		14	DAYS	PRIOR TO 1	ST DAY O	F SHOW MC	OVE-IN	
City, State, Zip:	Country:	On-site Auth	On-site Authorized Contact: On-site Cell Number:					
Contact Name:	one Number:	Contact Emo	Contact Email:		Cell Number:			
VOICE SERVICES, PBX Service	e – Domestic Long Distance I	ncluded	QTY I	NCENTIVE*	BASE	ON-SITE	TOTAL	
Single Line □ Instrument □ Non Dial 9 □ International Long Distance				\$275	\$345	\$414		
Multi Line Phone with (1) main number and (1) rollover line				\$415	\$520	\$624		
Speaker Phone Line with Polycom Instrument				\$465	\$ <i>57</i> 5	\$690		
CABLE TV SERVICE			QTY I	NCENTIVE*	BASE	ON-SITE	TOTAL	
Digital – Premium Cable TV Service				\$500	\$575	\$650		
A \$150 refundable deposit for each l	Digital Converter is required for e	each service or	rdered					
SPECIAL SERVICES		(	QTY I	NCENTIVE*	BASE	ON-SITE	TOTAL	
Labor / Floor Work – four lines per hour				\$125	\$125	\$125		
Distance Fee for each Telephone line delivered outside the facility				\$100	\$100	\$100		
Distance Fee for each Cable TV line delivered outside the facility				\$500	\$500	\$500		
SPECIAL QUOTE, Attachment A	or Statement of Work (if app	plicable)						
I hereby acknowledge the above listed on-site authorized contact is permitted to make on site changes to my order. I also acknowledge any change to my order could result in the credit card on file being charged. Upon execution of this document the Customer hereby authorizes Smart City Networks to provide services as requested herein, is authorized to request such services and acknowledges full and complete understanding of the Terms and			on-					
			by	ESTIMATED 10% TAX/FEES				
					GRA	ND TOTAL		
Conditions.			_					

## ACCEPTANCE OF TERMS AND CONDITIONS AND AUTHORIZATION OF ORDER

Printed Name:	Signature:	Date:
(X)	(X)	//

## PAYMENT IN FULL IS REQUIRED PRIOR TO THE EVENT

When your order is processed, you will receive an email with a link to Smart City Networks payment portal where you can **pay via credit card.** 

Make checks payable to Send completed form(s) with payment to:

SMART CITY NETWORKS 5795 W. Badura Avenue, Suite 110 Las Vegas, NV 89118



