Stand Cleaning Questionnaire

## Return form to: technical.services@sec.co.uk

|  |  |
| --- | --- |
| **event name** |  |
| Event date |  |
| Company name |  |
| Invoice address |  |
|  |  |
| Stand no | Size of stand (in meters) |
| Date cleaning required |
|  | Pre-show clean |
|  | Event open From:To: |
| CLEANING REQUIREMENTS (please tick) |
|  | Floor type |
|  | Carpet |
|  | Laminate |
|  | Wood |
|  | Vinyl |
|  | Other (please specify) |
| FURNISHINGS (please tick) |
|  | Counter tops |
|  | Plastic seats |
|  | Leather seats |
|  | Tables |
|  | Other (please specify) |
| STAND FABRIC (please tick) |
|  | Shell scheme |
|  | Glass (please specify, ie, glass tables, windows etc) |
|  | Walls (please specify what the walls are made from) |
|  | Wood |
|  | Other (please specify) |
| Special clean requirements – please specify below |
|  |  |
|  |  |
|  |  |