

Form 6 Declaration of Work Safety and Security (for special booth exhibitor)

(Compulsory for raw space booth exhibitor, original copy with common seal)

Deadline: July 18, 2025 (Friday)

Please email this form to: Beijing ZhongxinJiyi International Business Exhibition Co., Ltd.	
Tel: +8610-63180060	E-mail: +sallytong@goldenwill.com.cn
Contact: Ms. TONG Yuanyuan	Phone number: +8613910793406
Exhibitor Company Name:	
Contact Person Name:	Mobile Phone Number:
Telephone Number:	E-mail:
Booth Number:	

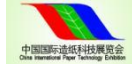
1. The company has carefully read this form and assures that we will abide by the relative regulations strictly.

2. The company promises that we will entrust a building company with construction qualification as the building worker for the exhibition, and will strictly abide by construction management regulations to conduct construction safely.

3. The company will submit design drawings for raw-space booth (marked with the length, width, and height, number of booth and company name) and booth design sketch to Beijing ZhongxinJiyi International Business Exhibition Co., Ltd. before August 30, 2024 for record. If booth design is not up to the standard, the official Operation Service Provider has the right to require changing of the design.

4. The company will submit the application to Beijing ZhongxinJiyi International Business Exhibition Co., Ltd., the official Operation Service Provider, before August 30, 2024, according to the "Special Booth Reporting Process".

5. All safety accidents and responsibilities occurred due to the violation of construction management provisions shall be borne by the construction unit, so as all the economic losses caused to Organizing Committee, official Operation Service Provider and exhibition hall.



Confirmation Receipt of Booth Construction Safety Responsibility (with common seal of exhibitor)

Name of the Construction Organization Entrusted by the Company:

Address of the Construction Organization Entrusted by the Company:

Responsible Person of Construction Organization: _____

Tel: Mobile Phone Number: