**SUPPLIER FORM**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SUPPLIER INFORMATION** | | | | | |
| **Supplier Name** | | Click or tap here to enter text. | **ABN** | | Click or tap here to enter text. |
| **GST Registered** | | Choose an item. | **Type of Entity** | | Choose an item. |
| **Address** | | Click or tap here to enter text. | | | |
| **COMMERCIAL DETAILS** (*provide details of the authorized contact person for commercial negotiations*) | | | | | |
| **Contact Name** | | Click or tap here to enter text. | **Position** | | Click or tap here to enter text. |
| **E-mail Address** | | Click or tap here to enter text. | **Phone No.** | | Click or tap here to enter text. |
| **PURCHASE ORDER (PO) DETAILS** | | | | | |
| **PO Contact Name** | | Click or tap here to enter text. | **PO E-mail** | | Click or tap here to enter text. |
| **PO Phone Number** | | Click or tap here to enter text. | **PO Fax No.** | | Click or tap here to enter text. |
| **SUPPLIER ACCOUNTS RECEIVABLE DETAILS** | | | | | |
| **Postal Address** | | Click or tap here to enter text. | **Phone No.** | | Click or tap here to enter text. |
| **Email Address** | | Click or tap here to enter text. | **Fax No.** | | Click or tap here to enter text. |
| **EFT DETAILS** | | | | | |
| **Account Name** | | Click or tap here to enter text. | **BSB Number** | | Click or tap here to enter text. |
| **Branch** | | Click or tap here to enter text. | **Account Number** | | Click or tap here to enter text. |
| **AUTHORISED PERSON** | | | | | |
| **Name** | Click or tap here to enter text. | | **Position** | Click or tap here to enter text. | |
| **Signature** |  | | **Date** | Click or tap here to enter text. | |

|  |  |  |
| --- | --- | --- |
| **CONTRACTORS – ADDITIONAL INFORMATION** | | |
| **Maintenance** | **Electrical** | |
| **First Aid** | **Fire Extinguisher** | |
| **Fabrication** | **Health** | |
| **Environmental/Waste Management** | **Other (List)** Click or tap here to enter text. | |
| In the previous 12-month period, was the organization or subcontractors subject to any action from government authorities, such as on the spot fines, improvement notices, prohibition notices, enforceable undertakings etc under HSE legislation? | | Yes  No |
| In the previous 12-month period, was the organization or subcontractors prosecuted under HSE legislation? | | Yes  No |

