|  |
| --- |
| **1. Contractor Details** |
| **Company / Business name:** |  |
| **ABN (Australian Business Number):** |  |
| **Street Address:** |  |
| **Postal Address:** |  |
| **Contact Person:** |  | **Phone:** |  | **Fax:** |  |
| **Mobile Phone:** |  | **E-mail:** |  |
| **Brief description of contract:**  |  |
| **Period of contract:** |  | **Time *- from:*** |  | ***to:*** |  |
| **Insurances / indemnity, etc.** |  |
| **Public Liability:** |  | **WorkCover Registration:** |  |
| **2. Contract Overview** |
| **Location of work:**  |  |
| **Details of contract work:**  |  |
| **Conditions the contractor has qualified for (circle answer)** |
| **Construction work** | **High risk construction work** | **Construction project** | **Other: (describe)** |
| **3. Council Contact** |
| **Contact Person:** |  | **Phone:** |  | **Fax:** |  |
| **Mobile Phone:** |  | **E-mail:** |  |

***Or in the absence of the above contact:***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Contact Person:** |  | **Phone:** |  | **Fax:** |  |
| **Mobile Phone:** |  | **E-mail:** |  |

**Council office Use Only**

All information is provided and correct. This paperwork has been approved for use.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date / /