

Acon Industries 2015 Limited T/A Acon Industries PO Box 16363, TE PUNA 3147 Phone: 07 552 6757 Email: admin@aconindustries.co.nz Web: www.aconindustries.co.nz GST: 116 021 625

This is a Hire Form under the Construction Contracts Act 2002. Please read clause 25 on the reverse.

DATE:	REF. No.							
Client's Details:	□ Individual	Sole Trader	□ Trust	Partnership	Compa	any 🗆 Oth	ner:	
Full or Legal Name:								
Physical Address:							Postcode:	
Billing Address:								Postcode:
Email Address: Phone No:								
Trading Name (if applicable) Fax No:								
DETAILS OF EQUIPMENT AND/OR WORKS WHICH ARE TO BE SUPPLIED							QUANTITY	PRICE \$ (excl. GST)
MINIMUM HIRE PERIOD - ½ DAY								
					TOTAL PR	RICE \$ (excl. GST)		
Costs of Delivery are: included in the Price in addition to the Price						GST \$		
Expiry Date:						TOTAL PRICE \$ (incl. GST)		
Payment Terms a	e:							

I accept the supply of Equipment, as detailed above, and certify that the information stated herein is true and correct. I have read and understand the TERMS AND CONDITIONS OF TRADE (overleaf or attached) of Acon Industries 2015 Limited T/A Acon Industries which form part of, and are intended to be read in conjunction with this Hire Form and agree to be bound by these conditions. I authorise the use of my personal information as detailed in the Privacy Act clause therein. I agree that if I am a director/shareholder (owning at least 15% of the shares) of the Client I shall be personally liable for the performance of the Client's obligations under this contract.

SIGNED (CLIENT):		SIGNED (WITNESS TO CLIENT'S SIGNATURE):			
Name:		Name:	Date:		
Position:		Address:			
ID: (Driver's Licence, Passport, etc.)	Date of Birth:		Postcode:		
SIGNED (ACON):		Name:	Date:		