

Account Application



Please complete, scan and return

Field	Please complete	Office use only
Company Name		
Trading Name (or as above)		
Web site		
Postal Address		
Physical Address		
Telephone/Cell		
Email		
Type of Business		
Authorised Contact (For bookings & orders)		Tick if order no req. <input type="checkbox"/>
Account Contact (For administration)		
Trade Reference		
Insurance	Please attach for insurance certificate	

Director _____

I confirm I have authority to enter into this agreement and to be bound by Atom Heavy Hire Limited's Terms and Conditions refer www.atomheavyhire.co.nz

Signed _____

Name _____

Date: _____

0800 855 999

www.atomheavyhire.co.nz