

ALLscope Industrial Services

PO Box 583
Hazelbrook NSW 2779

Phone: (02) 9896 0390
Fax: (02) 9896 8527

Email: service@allscope.com.au
Web: www.allscope.com.au



Pages: ONE Email: _____ Date: _____
Contact: _____ Fax: _____ Mobile: _____

AGREEMENT to Start Repairs or Service of Equipment at

Company Name _____

Company Address _____ State _____ P/Code _____

Job Details _____ Work Order No **J**

Job Address (if different from above) _____

Thank you for your enquiry and choosing *ALLscope Industrial Services* to commence the repair or service of your equipment. Prior to job start, there are a few things you should know. Our current *Terms and Conditions* and insurance details are available at **www.allscope.com.au**.

Of course cost is a consideration, so this table indicates our hourly rates ...

▪ Mechanical repair technician	\$85.00 per hour	(plus GST – includes travel)
▪ Diagnostic and fault finding	\$85.00 per hour	(plus GST – includes travel)
▪ After hour rate, if required	\$125.00 per hour	(plus GST – includes travel)
▪ Electrical repair technician	To Advise	(plus GST – includes travel)

Cost of any replacement machinery parts, materials and/or consumables used in the repair or service of your equipment are in addition and will be itemised on your invoice.

On job completion, ALLscope will debit your credit card (VISA or MasterCard) for the total invoice amount and will forward to you the invoice and payment receipt. Kindly provide valid credit card details below ...

VISA **MASTERCARD**

Card Number ____ / ____ / ____ / ____ Expiry Date ____ / ____

Cardholder's Name (as it appears on the card) _____

I authorise ALLscope Industrial Services to debit my credit card for the total invoice cost on completion of job requirements.

Cardholder's Signature _____ Cardholder's Phone Number _____

Please ensure those who approve payment are aware of the hourly rates indicated above. If you accept our rates and have read the ALLscope *Terms and Conditions* document, kindly sign the Agreement below and promptly return via fax to **(02) 9896 8527** with a **purchase order number** or authorisation name.

Should you have any questions or require assistance, contact ALLscope on (02) 9896 0390

Once signed by a (_____) representative and an ALLscope representative, this Agreement represents formal intention to commence the repair or service requested at the hourly rate indicated in the table above. It also represents full understanding by the client of ALLscope "Terms and Conditions". On ALLscope's receipt of the signed Agreement, a suitable start date will be scheduled.

ALLscope Signature _____	_____ Representative Signature	Purchase Order No <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Print Name _____	Print Name _____	
Date _____	Date _____	