

REQUEST FOR HIRE

Customer Details:

Company:	Delivery Return Method: (Please select one) <input type="checkbox"/> Pickup <input type="checkbox"/> Delivery
Delivery Address:	Contact Name:
	ABN:
	Phone:
	Email:

Unit Details:

Unit:	
Configuration:	
LEL Sensor Calibration Gas (Methane, Propane, etc.):	
Hire Length	
Start Date:	
Cost:	
Alarm Settings:	<input type="checkbox"/> Default <input type="checkbox"/> Off <input type="checkbox"/> Custom (please specify):
Data Download Kit:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Invoicing Details:

For faster turnaround and to help us return your equipment to you sooner, please include invoicing details. We will contact you with a quote and invoice you when we return your equipment. Please enter your purchase order number, if available.

Your purchase order no: _____ **OR** Maximum pre-approved value: \$ _____
 Credit card No: _____

Expiry Date: ____ / ____ CVV: _____

Type of Card: ☐ Visa ☐ Mastercard

Name on Card: _____