MARITIME ENGINEERS PTY LTD

A Member of James Fisher and Sons plc

Our File No._____

REQUEST FOR SERVICE
(non-account client)

This form must be completed and returned to our office prior to any work can be carried out by Maritime Engineers.

CLIENT DETAILS			
Name:			
Company:			
Address:			
Tel:		**Mobile:**	
Fax:		**Email:**	

SCOPE OF WORK
Note: 1) No operational tests of machinery or equipment will be carried out. 2) For occupational health and safety reason, Maritime Engineers will NOT conduct vessel surveys unescorted. An Owner or representative MUST at all times be on board during the survey.

COST ESTIMATE	$_____ plus 10% GST

CREDIT CARD DETAILS

Accounts MUST be paid prior to release of reports.

Type of Credit Card: ☐ VISA ☐ MASTERCARD

Credit Card Number: ☐☐☐☐ - ☐☐☐☐ - ☐☐☐☐ - ☐☐☐☐

Expiry Date: ☐☐ / ☐☐

Card Holder's Name

ACKNOWLEDGEMENT AND AUTHORISATION

I have read and accept Maritime Engineers' Standard Terms and Conditions which is available on www.maritime-engineers.com.au and agree with the conditions of this appointment as stated above.

Signature:	Name:
	Date:

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