

BOOKING FORM – EXTERNAL TESTING & SERVICES

COMPANY DETAILS Company Name: _____ Site Address: CONTACT DETAILS Contact Name: _____ Mobile: _____ Email: _____ JOB DETAILS Preferred Date: _____ Technician: _____ Purchase Order Number: _____ Parking Details*: _____ Site Requirements: Description of work (equipment types & quantity): Select one: Automatically replace failed gear / Require authorisation to replace Discard Failed Gear / Retain Failed Gear for Collection with Goods Select one: SITE REQUIREMENTS ** If site requirements aren't met this may result in testing or services being rescheduled or delayed Technicians require a clean dry area on site to perform the job, with sufficient lighting Access to power may be required where Van access is not permissible Materials handling equipment is required for items over 30kgs. If the site is unable to supply, Standen's can arrange equipment at customers cost with prior notice > STANDEN'S full Test Van is 7.2m, please advise if parking or access is not available for this vehicle Email completed form to: testing@standens.co.nz STANDEN'S USE ONLY: JOB CHECKLIST Booking received by: _____ Date of booking: _____ Job start time: _____ Job finish time: _____ □ _____ Client date confirmed □ By: _____ Lead time advised Equipment booked Loaded to Core □ By: _____ Technician allocated Sales order raised □ #: _____

Paperwork amended

☐ Certificate completed ☐ Date: