



Tool Hire Taranaki Limited

600 Devon Street East, Fitzroy

New Plymouth 4312

info@tht.co.nz

(06) 757 8665

Client Information Form

Please complete all sections and read the Terms and Conditions of Hire over the page or attached.

Date: _____

Clients Trading Name: _____

Clients Legal Name: _____

Phone: _____ Email: _____

Mobile: _____ Postal Address (If Different): _____

Physical Address: _____

_____ Postcode: _____

Commercial Clients: ☐ Sole Trader ☐ Partnership ☐ Company ☐ Trust

Company Number: _____ Date Established: _____

Contact 1: _____ Contact 2: _____

Position: _____ Position: _____

Phone: _____ Phone: _____

Details of: Owner (If Sole Trader) Partners (If Partnership) Directors (If Company) Trustees (If a Trust)

Full Name: _____ Full Name: _____

Home Address: _____ Home Address: _____

ID: _____ Date of Birth: _____ ID: _____ Date of Birth: _____

(Driver Licence, Passport, Birth Certificate)

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Home Phone: _____ Home Phone: _____

You certify that all information supplied is true and accurate and that you are authorised to make this application for credit. You have read and understand the Terms and Conditions of Hire (over the page or attached) of Tool Hire Taranaki Limited which form part of, and are to be read in conjunction with this Client Information Form. You agree to be bound by the Terms and Conditions of Hire (over the page or attached) of Tool Hire Taranaki Limited and authorise the use of your personal information as detailed in the Privacy Act 2020 clause.

Signed (Customer): _____ Signed (Supplier): _____

Name: _____ Name: _____

Date: _____ Date: _____