SWAT access

CUSTOMER REFERENCE FORM (non-account Hires)

YOUR DETAILS	
Full name: -	
Full Address: -	
Telephone Number: -	**Email address – for your invoice and confirmation of order**

Insurance
Insurance of powered access equipment is the customer's responsibility. This must include but not be limited to: - • Theft • Third Party claims • Paint spillage and/or overspray • Damage caused by non-completion of daily maintenance and checks • Use by untrained operators • Negligence and vandalism • Continued Hire Charges

DISCLAIMER
The Data Protection Act 1998 will be always complied with. In signing this form, you are agreeing to abide by the Terms and Conditions of IPAF and the CPA Model Terms and Conditions of Hire (Copies available on request). Payment terms are strictly 30 days from invoice unless otherwise agreed in writing. **I confirm that I wish to hire a machine from SWAT access ltd.** **Print Name**_____ **Signature**_____ **Date**_____ **This form will not be accepted without a signature.**

Registered office: Unit 3, Longton Business Park, Station Road, Little Hoole, Preston, PR4 5LE
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Company Registration Number: 07330188 - VAT Registration Number: 994 6367 58