



PORT TAMWORTH CONTAINERS

Container Hire Agreement

Container Numbers: _____

On-hire date: _____

Off-hire date: _____

Account Name: _____ ABN: _____

Contact Name: _____ Email: _____

Postal Address: _____

Telephone: _____ Mobile: _____

Delivery Address: _____

Fax: _____

****I Hereby Agree to Port Tamworth Containers Terms and Conditions**

Signed: _____

HIRE RATES AND PAYMENT DETAILS

Deposit: _____ C/Card: _____

Higher Rate: _____ Exp: _____

Transport: _____ Notes: _____

CREDIT CARD AUTHORIZATION

Name: _____

Hereby give Port Tamworth Containers, authorisation to process credit card payment of monthly hire using the credit card number supplied.

PLEASE NOTE: Monthly payments will be processed in the first week of the month in advance.

Signed: _____ Date: _____

Name: _____ Invoiced up to: _____