

Section 1: Customer Details

Customer Name: _____
Fill Site Address: _____
Contact Name: _____
Contact Phone Number: _____

Section 2: Cartage Company Details

Carrier Name: _____
Contact Name: _____
Contact Phone Number: _____
Truck Rego: _____

Section 3: Job Details

Volume of Fill: _____ (m³)
Estimated dates of transport: Start ___/___/___ Finish ___/___/___
Type of Job Site: _____
Type of Fill: Top Soil Concrete Asphalt
(Tick as many as apply) Clay Rock Other _____
Does the fill originate from: HAIL Site Consented Contaminated Site
(Tick as many as apply) Horticultural Auckland CBD
Comments: _____

Section 4: Customer Acceptance Details – OFFICE USE ONLY

Date:/...../.....
WA Job Number:
Docket Number:
Customer Order Number:
XRF Reference Number: