

## SUPPLIER APPLICATION FORM

Please complete the following details and return to the City of Karratha. **\*Indicates mandatory information.** Mandatory EFT information is only required when being paid by EFT.

<b>* Your City of Karratha Contact:</b>	
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<b>* Business Name:</b>	
<b>* Postal Address:</b>	
<b>* ABN</b>	
<b>* Telephone:</b>	
Mobile:	
Fax:	
<b>* Contact Name:</b>	
<b>* Position:</b>	
Sales email address: <i>(if applicable)</i>	

<b>To be paid by EFT, please complete the section below:</b>	
Remittance Reference: <i>(if any i.e. Debtor's No)</i>	
<b>* Remittance email address:</b>	
<b>* Bank Name:</b>	
<b>* Bank Branch:</b>	
<b>* BSB No:</b>	
<b>* Account Number:</b>	
<b>* Account Name:</b>	

**Points to note:**

All Tax Invoices **MUST** quote a valid Purchase Order number. Failure to provide the invoice with this information will result in your invoice being returned unpaid

No goods or services are to be supplied until you receive a valid Purchase Order number. Invoices cannot be processed for payment until a Purchase Order is created

Council's Creditors Department cannot provide you with a valid Purchase Order. The SUPPLIER must check with their contact at the City of Karratha to obtain this information if it has not already been supplied

All Tax Invoices must be Australian Taxation Office compliant. Failure to provide the invoice in this format will result in your invoice being returned unpaid

All invoices and credit notes must be sent or delivered to the **CREDITORS** Department only (not to your City of Karratha contact). The addresses for sending the invoices to are as follows:

City of Karratha  
PO Box 219  
Karratha WA 6714

**OR**

Fax: (08) 9185 1626  
Email: [creditors@karratha.wa.gov.au](mailto:creditors@karratha.wa.gov.au)

<b>*Signature:</b>	Date:...../...../.....
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<b>Office Use:</b>	Creditor No: Contact advised:...../...../.....
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