

NEW SUPPLIER REQUEST / AMENDMENT FORM
Application for a Supplier identity for RATCH-Australia Corporation Limited (RAC)

SAP Company code	7040	SAP Purch Organisation	0070	Supplier No. if amendment	
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SECTION A – Supplier to complete

SECTION B – RAC use only

(*denotes compulsory field. Application will be rejected unless these fields are completed.)

<input checked="" type="checkbox"/>	New Application	<input type="checkbox"/>	Amendment to existing details
<input type="checkbox"/>	Block	<input type="checkbox"/>	Close
<input type="checkbox"/>		<input type="checkbox"/>	Re-Open

SECTION A- Supplier to complete

* Legal Name	
* Trading Name	
* ABN	
* Legal entity status(Please circle)	Public Company/Private Company/Partnership/Trust/Sole Trader

Contact Information

Street Address		PO Box	
* Street name & no		PO Box no.	
* Post Code		Post code	
* City / Suburb		City / Suburb	
* State		* Country	
* Contact Name		* Contact Phone	

Payment Information – In order for the application to be processed please provide a copy of the encoded bank deposit slip along with your bank details, or list the bank details on company letterhead.

EFT Details	Remittance Information (tick preferred method)	
* Bank Account Name		
* BSB No	<input type="checkbox"/>	Fax number
* Account No	<input type="checkbox"/>	* Email address

By signing below, the Supplier agrees to supply the goods and/or services in accordance with:

- (a) The terms and conditions of any applicable agreement between RAC and the Supplier for the supply of the goods and/or services; or
- (b) If (a) does not apply, the Supplier agrees to be bound by the RAC Purchase/Service Order General Terms and Conditions ("T&Cs") (available at http://www.ratchaustralia.com/Terms_and_Conditions.html). Capitalised terms used in this form, but otherwise not defined, have the meaning they have in the T&Cs.

* Signed		* Date	
* Name		* Position	

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Purchase Orders

Note that SAP will be set up to auto-send PO's to Email/Fax if a value is entered in either below.

Email address #		Fax #	
Contact name		Phone	

(refer to page no. 1 & 2 of the T&Cs)

*Industry description (Please circle)

SC	Contractor/subcontractor	Supplier engaged to carry out Services on-site under a contract agreement with RAC or subcontract agreement with a principal/RAC.
PR	Product	Supplier that provides Goods for use by RAC. This may include off-site fabrication and repairs.
PS	Product & Services	Supplier that provides Goods <u>and</u> contractor/subcontractor Services.
PC	Professional Consultant Services	Supplier that offers professional / expert advice (e.g. solicitors), and design services and design and construct services.
OS	Overhead Services	Supplier that supplies ancillary services not directly part of the scope of RAC's business where there is low risk and sighting insurances is not required: e.g. hotels, medical services, couriers.

(If selecting PC, SC, PS, then please submit copies of your insurance certificates and fill out the Supplier Questionnaire on page no. 3 of this form)

*Insurance information

a) Certificate of Currency for Work Cover	Cert. No:	Exp.Date:
b) Certificate of Currency for Public Liability	Cert. No:	Exp.Date:
c) Certificate of Currency for Professional Indemnity	Cert. No:	Exp.Date:

(refer to page no. 3 of the T&C's)

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SUPPLIER QUESTIONNAIRE

Principal: RAC		
		Insert Yes (Y) or No (N) below
1.	Is the Supplier conducting the business of an employment agency or labour hire firm? This includes the situation where a nominated employee of the Supplier (for whom the Supplier is liable for payroll tax) is placed with RAC for a period.	
2.	Are Goods being provided and/or will the Supplier be providing its own equipment and materials to perform the work under the contract? If yes , will the value of the materials and equipment represent more than 50% of the value of the contract?	
3.	Will the Supplier's Services be provided to RAC for less than 90 days in aggregate during a financial year?	
4.	Does the Supplier also provide similar services to principals other than RAC?	
5.	Will the Supplier provide the Services to RAC intermittently or on average of 10 days or less, during any month in a financial year?	
6.	Will two or more people perform the work under the contract?	
7.	Are similar services provided to the general public? If yes , does the Supplier advertise its services to the general public on a regular basis (e.g. Yellow Pages)?	

Supplier's signature

Date

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SECTION B – RAC Use Only

By sign-off the Business Unit confirms:

- The T&C's have been sent to the Supplier; and
- Supplier assessment form has been completed for all PC, SC and PS categories of suppliers.

Site Administrator		Site Manager	
Print Name		* Print Name	
Signature		* Signature	
Phone number		* Phone number	
<i>Did you complete SAP Company Code and Purchasing Organisation on top of page 1?</i>			

Supplier store locations address details.
If the Supplier operates multiple stores which we may want to deal with please specify in a separate list that looks like the table below (preferably Excel) the following details:

Name	Street	City	Post Code	Country	Region (State)	Telephone	Fax #	Email Address #

Indicate which one should be used upon PO release for SAP to send the order to, email is preferred.

* Payment terms	30 days EOM	<input checked="" type="checkbox"/>	Customer Number in Supplier's database	
	60 days EOM	<input type="checkbox"/>		
	Other (EGM approval required)	<input type="checkbox"/>		

Energy Classification

* Will invoices from this supplier include charges for Electricity, Water or Gas (including indirectly via landlord tenancy for metered utility charges)	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/> *
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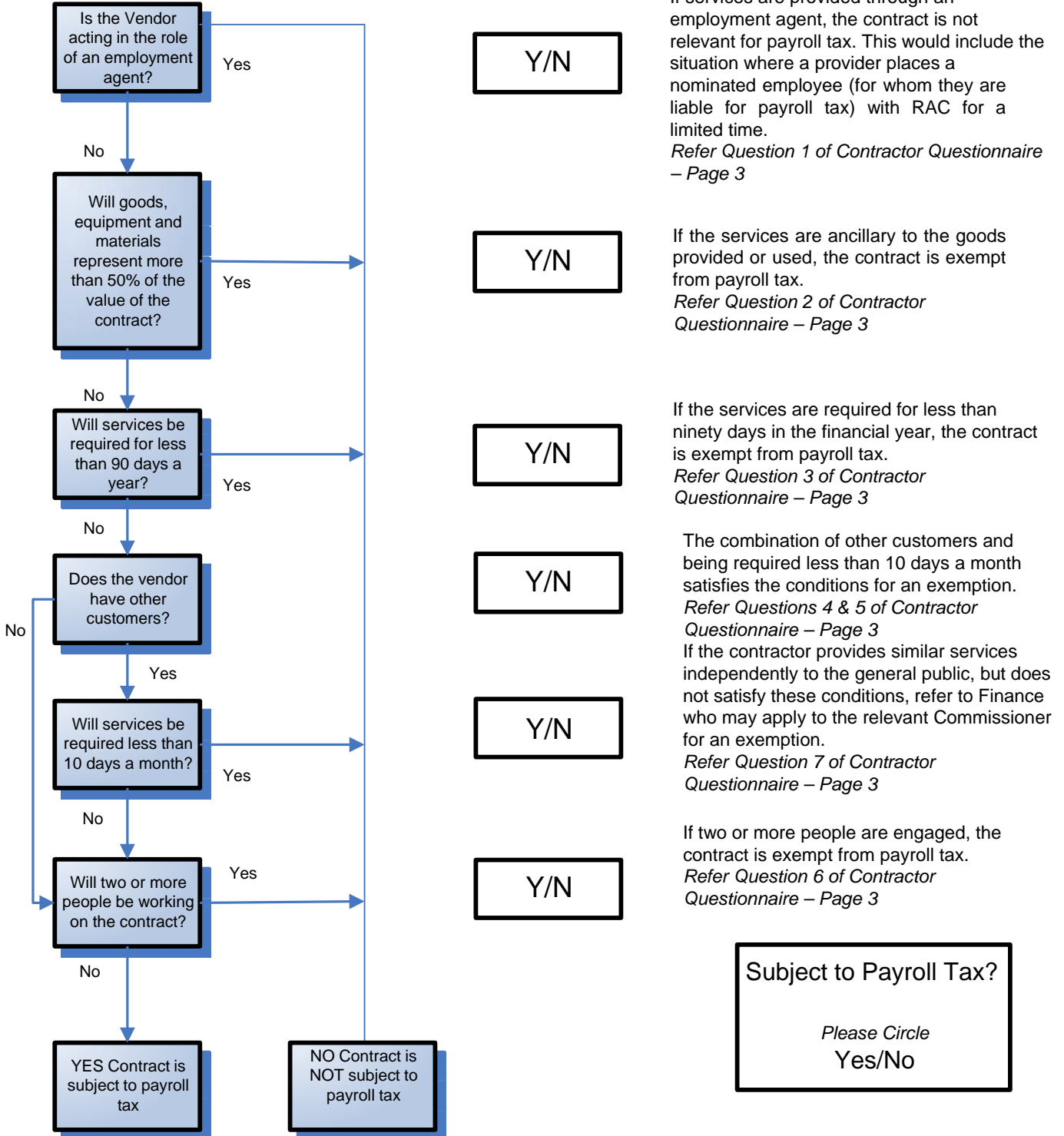
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Subcontractor Payroll Tax Assessment

OFFICE USE ONLY

Vendor Name: _____

Please Circle



If services are provided through an employment agent, the contract is not relevant for payroll tax. This would include the situation where a provider places a nominated employee (for whom they are liable for payroll tax) with RAC for a limited time.
Refer Question 1 of Contractor Questionnaire – Page 3

If the services are ancillary to the goods provided or used, the contract is exempt from payroll tax.
Refer Question 2 of Contractor Questionnaire – Page 3

If the services are required for less than ninety days in the financial year, the contract is exempt from payroll tax.
Refer Question 3 of Contractor Questionnaire – Page 3

The combination of other customers and being required less than 10 days a month satisfies the conditions for an exemption.
Refer Questions 4 & 5 of Contractor Questionnaire – Page 3
If the contractor provides similar services independently to the general public, but does not satisfy these conditions, refer to Finance who may apply to the relevant Commissioner for an exemption.
Refer Question 7 of Contractor Questionnaire – Page 3

If two or more people are engaged, the contract is exempt from payroll tax.
Refer Question 6 of Contractor Questionnaire – Page 3

Signed: _____

Date: ____/____/20____

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Agreement details

Is the Supplier used as one-off?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Are fixed prices negotiated?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Date negotiated prices expire?	__/__/__				
Have you entered into a contract?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
	If "Yes", was it on standard RAC terms?				
	If "NO", why not?				
	If a non-RAC contract to be signed, has it been approved by the relevant commercial manager and has the legal team approved it?				
When does it expire?	__/__/__				
How many different Goods or Services will this supplier provide?	< 10	<input type="checkbox"/>	11-50	<input type="checkbox"/>	>50 <input type="checkbox"/>
What is the estimated annual spend?	< \$1,000		<input type="checkbox"/>	\$1,001 to \$10,000 <input type="checkbox"/>	
	\$10,000 to \$100,000		<input type="checkbox"/>	> \$100,000 <input type="checkbox"/>	
* Does the contract include a retention of payment arrangement	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
If Yes, Value:	\$	%	Release Date:		
* What is the settlement / rebate discount percentage?	%				
Person who arranged agreement					
*Name					
*Contract name/Business Unit					
*Contact phone number					
Is Supplier also a Customer	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Customer number: <input style="width: 100px;" type="text"/>

Checklist

In order to ensure your application is processed all mandatory fields (*) must be completed. For your reference please use the checklist below.

ABN number	Yes	<input type="checkbox"/>
Bank details – copy of deposit slip/bank statement/letterhead	Yes	<input type="checkbox"/>
Industry description	Yes	<input type="checkbox"/>
Payment terms	Yes	<input type="checkbox"/>
Supplier Questionnaire – to be completed for vendors SC/PC/PS	Yes	<input type="checkbox"/>
Site manager approval	Yes	<input type="checkbox"/>
Energy classification	Yes	<input type="checkbox"/>
Subcontractor Payroll Tax Assessment has been completed	Yes	<input type="checkbox"/>