

Job Order Form

Full Company/Customer Name:	Purchase Order Number:
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Contact Name:	Contact Phone Number:	Fax or E-mail:
Delivery Address:	Postal Address:	

Please give as much detail as possible (if space is insufficient please attach additional pages)

Details of work required:

Machining tolerances if not stated on drawing: <i>(where applicable)</i>	Customer Specified Tolerance: ± _____ mm	Standard Convention: <input type="checkbox"/> Using AS.1100.201 (1992), table A1, A2, or A3
Sketch Supplied: <input type="checkbox"/>	Drawing Supplied: <input type="checkbox"/>	Sample Supplied: <input type="checkbox"/>
Other Components Supplied: <input type="checkbox"/>		

Note, files can be uploaded on the website through the online jobbing quote form

Special Instructions: *(protection, packaging, delivery, etc.)*

Please tick one of the following boxes:

Job Number:
(Internal use only)

- Credit Account Sale:** Refer to 'Payment' in TMP Terms & Conditions. Subject to an approved 'Credit Account Application Form' having been submitted.
- Cash Sale:** All 'Cash Sales' will require a deposit and must be paid in full at time of completion. All other terms & conditions of trade apply as per TMP Terms & Conditions.

CASH SALES CUSTOMERS' PLEASE NOTE:
WORK WILL NOT BE RELEASED UNTIL ALL DUE PAYMENT HAS BEEN MADE IN FULL

I / We have instructed TOUGH METAL PARTS to undertake the above work. I / We have read and agree to be bound by the TMP Terms and Conditions of trade. I / We warrant to TOUGH METAL PARTS that the above information is to the best of my knowledge, information and belief true and correct and that I am duly authorised to enter into this agreement.

* Signed & Accepted: Date:/...../.....

Print Full Name:

* **Note: Work cannot be accepted without a valid customer signature**