

Wastech Engineering
 33 Wedgewood Road
 PO Box 5094
 Hallam VIC 3803
 Australia
 Ph: 1800 465 465



Consumables Order Form

Fax to 03 8787 1650 or email to sales@wastech.com.au

Orders must be received by 12:00pm for processing

DATE	COMPANY NAME	PO NUMBER
CONTACT NAME	PHONE NUMBER	ACCOUNTS EMAIL

DELIVERY ADDRESS

Name	
Street Address	
Suburb	
State	Post Code

INVOICE ADDRESS

Name	
Street Address	
Suburb	
State	Post Code

Melbourne metropolitan orders can be upgraded to a sameday delivery for an extra \$40.00 +GST if ordered before 11:00am **YES! Please upgrade my order**

ITEM	DESCRIPTION	UNITS PER BOX	QTY ORDERED
9Tape (9mm/250m)	For B3, B4, B5W, B16, B20, B30, 3-X12 models baling anything. For X10, X16, X25 models baling cardboard only.	8 rolls per box \$240.00 +GST	<u> </u> box(es)
13Tape (13mm/250m)	For X16, X25 models baling plastic only. For X30 and B30W models baling anything.	8 rolls per box \$340.00 +GST	<u> </u> box(es)
19Tape (19mm/400m)	For X50 and B50 models.	4 rolls per box \$450.00 +GST	<u> </u> box(es)
Bale Tape Rack	Metal rack for dispensing Bale Tape and Twine.	1 rack \$90.00 +GST	<u> </u> rack(s)
Plastic Bags	Plastic bags to suit Wastech Recycle Rack.	150 bags per box \$220.00 +GST	<u> </u> box(es)
Recycle Rack	Metal rack for collection and separation of recyclable plastics.	1 rack \$270.00 +GST	<u> </u> rack(s)
Recycle Rack on wheels	Metal rack on wheels for collection and separation of recyclable plastics.	1 rack \$305.00 +GST	<u> </u> rack(s)



"...engineering products & solutions for the recycling & waste industries..."

CREDIT CARD PAYMENT AUTHORISATION

(note: all transactions over \$1,000.00 will incur a 1.2% handling fee)

I authorise Wastech Engineering to charge my credit card as follows:

Name on Card: _____

Company Name: _____

Card Type: **MASTERCARD** **VISA**
(please circle)

Card Number: _____/_____/_____/_____

Expiry Date: ____/____ Security #: ____
(also known as CCV or CVC, last 3 digits)

Amount: \$ _____
(inc GST)

In payment of: Inv# _____ or customer PO # _____
or other reference: _____

Cardholder signature: _____ Date: ____/____/____

Contact phone or email: _____

Please tick if you require a receipt to be:

Emailed

Mailed

Office Use Only:

Date Payment Processed: ____/____/____

Entered on account: ____/____/____

Receipt sent to customer: ____/____/____

Initials: _____

Receipt#: _____

