Relocation/Collection Request



Current Location			
Site Name (if applicable)			
Street			
Suburb			
Location (eg, Office, Basement)			
Stairs			
Lift Access			
Site Access (eg, loading bay, height restriction, parking)			
Additional info (eg, site induction/PPE)			
Primary Contact	Phone	Mail	
Secondary Contact	Phone	Mail	
IT Contact	Phone	Mail	

Collection/Recycle Only		Teo	chnician required fo	r install/networking
Delivery Location				
Site Name (if applicable)				
Street				
Suburb				
Location (eg, Office, Basement)				
Stairs				
Lift Access				
Site Access (eg, loading bay, height restriction, parking)				
Additional info (eg, site induction/PPE)				
Primary Contact	Phone		Mail	
Secondary Contact	Phone		Mail	
IT Contact	Phone		Mail	

PRINT DEVICE DETAILS				
PO/Customer Reference		Requested Date		
Device Model/s		I		
Serial Number/s				

OFFICE USE ONLY	AUTHORISATION
Sold to Shipped to KM order	Name
Relocation/collection + GST Total charge (inc. GST) \$ \$ \$	Job Title
Total monthly storage (if applicable) + GST Total charge (inc. GST) \$ \$ \$	Signature Date
	I authorise Konica Minolta Business Solutions Australia to relocate/ collect our equipment. I agree and accept the Total charge(s) (<i>inc. GST</i>) as specified on this form.