



Client Agreement Form
(NIR-RFC-FORM-012 v8)

Quote No.: BOLDED QUOTE NUMBER

RADIOFREQUENCY HAZARD PROBE CALIBRATIONS
CLIENT AGREEMENT FORM & QUOTATION

The calibration service provided will be performed in accord with procedures described in the ARPANSA Non-Ionising Radiation Branch Radiofrequency Calibrations Laboratory Quality Manual.

Calibration Service Provided

Client equipment:

Meter model:

Table with 4 columns: Probe Model, Qty, Test Frequency (MHz), and Nominal Field Level. It contains four empty rows for data entry.

Note: A survey fee of up to \$190.00 (inclusive of GST) applies for faulty equipment when calibration is unable to be completed, or for additional work not covered under this calibration quotation.

Nominated calibration date: Calibration Quotation Price (including GST): \$ GST: \$

Signed: (Nkem Anele) Date:

The quotation for the above services is valid for thirty days from the date shown above. All services provided are subject to ARPANSA's standard terms and conditions: (http://www.arpansa.gov.au/pubs/calibration/RFCterms.pdf) Equipment must be received complete and in good condition prior to the nominated calibration date above if calibration is to be completed on schedule.

Goods must be marked EQUIPMENT FOR EMR CALIBRATION – HAND DELIVER.

This agreement will be deemed to be accepted if either this form is signed and returned or a purchase order/calibration request citing the above quote number is received. An invoice will be issued on the return of goods; payment is due within 30 days of invoice date. A return consignment note should be included.

Client: Attn:
Fax No. Email:

- I accept this quote
I will arrange return of equipment when notified that is it ready for collection. OR
I request that ARPANSA arrange return of equipment by commercial courier and agree to reimburse ARPANSA for any costs incurred with such arrangements.

Signed: Date: