

Form A - Supplier Details



Please read and complete carefully, as this information you provide may effect your payments and tax liability

SECTION A - COMPANY DETAILS

Which FRESHMAX team member do you deal with?

Company Name:

Trading Name/s

(list all if trading under multiple names?)

ABN

Trading/Farm Address

Suburb / Town

post code

Postal Address

Suburb/Town

post code

Phone (Office)

(_____) _____

Fax (office)

(_____) _____

Email id (for general contact)

Main Contact Name

Phone (Mobile)

Email id

BUSINESS OWNER DETAILS

Principle/Owner's Full Name

Mobile

BANK DETAILS - please note, all payments are made via EFT

Bank

Branch/BSB

Account Number

Account Name

GROWER REMITTANCE

We are able to submit your grower remittance in several forms. Please advise which you would prefer

email to this email id _____
 Mail - postal address as above _____
 Fax - to this number _____

Banana growers only

Do you want FREIGHT COSTS deducted from your remittance?

YES

NO

Form A - Supplier Details



SECTION B - QUALITY CONTROL

Business Type grower grower/packer wholesaler

QA Accreditation (HACCP, Freshcare, etc) copy attached

Test Results (MRLs, Micro & Heavy Metal) copies of each product type attached

Product & Public Liability Insurance copy attached

Shed Number

IP Number

Horticulture Produce Agreement (attached agreement is completed, signed & returned) (please acknowledge)

SECTION C - COMMONWEALTH HORTICULTURE LEVY & ROYALTIES

Do you require Freshmax to deduct the Commonwealth Government Levy on your behalf?

Yes please deduct the levy on our behalf for the following produce we supply to FRESHMAX

- | | | | |
|------------------------------------|---------------------------------------|------------------------------------|--|
| <input type="checkbox"/> Grapes | <input type="checkbox"/> Orange | <input type="checkbox"/> Apple | <input type="checkbox"/> Cherry |
| <input type="checkbox"/> Chestnut | <input type="checkbox"/> Pomelo | <input type="checkbox"/> Pear | <input type="checkbox"/> Avocado |
| <input type="checkbox"/> Asparagus | <input type="checkbox"/> Grapefruit | <input type="checkbox"/> Peach | <input type="checkbox"/> Banana |
| <input type="checkbox"/> Garlic | <input type="checkbox"/> Blood Orange | <input type="checkbox"/> Nectarine | <input type="checkbox"/> Mango |
| <input type="checkbox"/> Mushroom | <input type="checkbox"/> Dates | <input type="checkbox"/> Plum | <input type="checkbox"/> Rockmelon |
| <input type="checkbox"/> Mandarin | <input type="checkbox"/> Persimmon | <input type="checkbox"/> Apricot | <input type="checkbox"/> Passionfruit |
| <input type="checkbox"/> Tangelo | <input type="checkbox"/> Watermelon | <input type="checkbox"/> Kiwifruit | <input type="checkbox"/> Other Produce |

*Other - Please detail _____
 Please list all stonefruit varieties, you supply, that incur royalties (EG: ZeeSweet)

Please note, any levies paid on your behalf will be deducted from supply payments.

No, Commonwealth Levy is NOT to be paid on our behalf - please complete exemption form attached.
 Our LRS Account number is: _____

DECLARATION: I declare, that to the best of my knowledge and belief, the information supplied on this form is correct in every essential detail.

Name _____ Signature _____
 Date _____ Title _____

Internal Use Only

Checked all signatures, dates and details

ABN Check done - copy attached

Entered P2M/Greentree

iCix - entered / all docs loaded

Executed HPA returned to grower

Electronic copy filed

Posted Date: _____

Freshmax National Pty Ltd

Freshmax Australia Pty Ltd (Wholesale)

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