

Request for Credit form

FAX to 02 8787 7588



1. My contact details are...

Company name: _____

Requested by (your name): _____ Job title: _____

Phone: _____ Fax: _____ Email: _____

PO Box 7100
Wetherill Park BC NSW 1851
500 Victoria Street
Wetherill Park NSW 2164
www.jdsecurity.com.au
Accounts Department
T +61 2 8787 7562
F +61 2 8787 7588
accounts@jdsecurity.com.au

2. I am requesting credit for a...

(please tick one and fill out all details to enable us to process your query)

Response invoice/charge

Service call invoice/charge



Invoice no.	Docket no./s	Type of event/s for response claims only (e.g. intruder alarm etc)

Other invoice/charge _____
(please provide as much detail as possible)

Copies of the invoices and docket/s shown above must be attached to enable processing of your query

3. Please describe in full the reason for your credit request

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4. Please read the terms and sign before faxing back

- Any request for credit must be received within 14 days of the invoice issue date
- Should the request for credit be denied and the invoice found to be payable, the charges must be paid by the due date to avoid suspension of service
- Should the request for credit be denied and you still disagree you may request a review of the decision but only on the basis that you supply additional documentation that supports your claim
- Any disputed charges resolved in favour of JD Security may be subject to an administration fee

I (print name) _____ have read and understood the terms and conditions attached to this request for credit and am authorised by my employer to make such request. I state that the information provided on this request for credit is true and correct to the best of my knowledge.

Signature (of person shown in Section 1) _____ Date _____

Thank you. We will be in touch with you shortly to discuss your query further.