

COUNSEL'S CHAMBERS LIMITED

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A.C.N. 000 111 302

When replying please quote

CARD AND TAG ACTIVATION FORM LICENSEES & READERS

Please read, complete and sign this form and return to Counsel's Chambers Limited to activate your proximity card or tag.

Surname:..... First name:.....

Residing Floor & Building:.....

Attached Floor & Building (leave blank if same as residing floor):.....

Phone Number:..... E-mail:.....

I am a Licensee/Reader (please circle one)

Please indicate which proximity access device you have chosen.

Proximity Card:

Proximity Key Tag:



Serial Number:.....

Please note the following:

- The proximity card or tag that is issued is the property of Counsel's Chambers Limited.
- The card will provide after hours access into the building and onto all floors of Selborne & Wentworth Chambers and the National Dispute Centre.
- The cost to replace a card or tag that has been lost, stolen or damaged due to misuse is \$50 + GST.
- **A \$55 deposit is necessary**, and must be made by cash, cheque or credit card.
- The deposit will be refunded upon the return of the access device.
- The user will be responsible for the use and ownership of the access device.

SIGNATURE:.....

Office Use Only

User Activation Date:..... CCL..... Deposit: Made by.....

User Termination Date:..... CCL..... (Cheque) (Credit Card) (Cash)

Accept ID #:..... Extra Notes:.....

Request Letter Check:

17 4 Phillip Street, Sydney, NSW 2000, Australia

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