

EMERGENT

Contractor Invoicing Authority

Form to be completed to enable Emergent & Co Limited to facilitate payment of your invoice relating to signed timesheets for approved contract assignments.

Contractor Personal Name:

Trading As (Company Name):

Postal Address 1:

Postal Address 2:

Postal Address 3:

Contact Numbers:

Mobile:

Home:

I, _____ (Insert Full Name)

hereby authorise and request you to pay my invoices, that fall in line with the agreed contract agreement, directly into my/named bank account. I agree that you can pay into this account from receipt of this authority, which will remain in force, until I cancel this authority in writing. I agree that all invoices that I issue to Emergent & Co Ltd will comply with the statutory legislation for tax invoices, will include all relevant detail and an accurate indication of the hours I have worked for the given month, supported by client approved timesheets. I hereby further acknowledge that without supporting timesheets, that payment will be withheld until authorised documentation is received by Emergent & Co Ltd and the details on my invoice may be questioned and Emergent & Co Ltd may not pay the amount of the invoice.

Goods and Services Tax:

(Please provide a confirmation of the IRD approved GST Number registration.)

Please record your GST Number: _____

Bank Account Details:

(Please attach a deposit slip as further confirmation of account details.)

Bank Name: _____ Branch: _____

Bank Account Number: _____
(Bank No.)-(Branch No.)-(Account No.)-(Suffix No.)

Name On Account: _____

Contractors Signature: _____ Date: _____

Please complete this form and return to emergent.timesheets@emergent.co.nz