



**Rehab Hire Pty Ltd**  
 310 Lorimer Street  
 Port Melbourne VIC 3207  
 Telephone  
 03 9646 7200  
 Facsimile  
 03 9645 3375  
 Email  
 contact@rehabhire.com.au  
 www.rehabhire.com.au

# Hire Request Form

Customer Name: \_\_\_\_\_

Purchase Order # \_\_\_\_\_

Telephone: \_\_\_\_\_

Hire Start Date: \_\_\_\_\_

Email: \_\_\_\_\_

Hire End Date: \_\_\_\_\_

Customer Address: \_\_\_\_\_

Delivery Address: \_\_\_\_\_

Suburb \_\_\_\_\_

Suburb \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Item Code	Item Name	Quantity	Price

Additional Information:

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## Credit Card Details

Name of Card Holder: \_\_\_\_\_

Signature 

Card Number:

Expiry Date:                    /                    /                    CCV: \_\_\_\_\_

Date:                    /                    /

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