#### CLIENT REGISTRATION FORM - FINANCIAL ASSESSMENT SERVICES

This registration form should be completed by each business unit intending to utilize Equifax in accordance with services offered under the **NSW Government’s** Financial Assessment Services Prequalification Scheme (2017-2019). Please complete email to [EFVRadmin@equifax.com](mailto:EFVRadmin@equifax.com)

Upon receipt, Kingsway will set up your account and email login credentials to the nominated users.

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| **Organisation Name:** |  |
| **Division:** |  |
| **ABN:** |  |

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| --- | --- | --- | --- |
| **Address:** |  | | |
| **State:** |  | **Postcode:** |  |

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| --- | --- | --- | --- |
| **Postal Address:** |  | | |
| **State:** |  | **Postcode:** |  |

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| --- | --- | --- | --- |
| **Principal Contact:** |  | | |
| **Phone:** |  | **Mobile:** |  |
| **Email:** |  | | |

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| **Billing Contact:** |  | [ ] as above |
| **Phone:** |  | |
| **Email Invoices to:** |  | |

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| --- | --- | --- |
| **Additional Authorised Users:** | |  |
| **Name:** | **Phone:** | **Email:** |
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Office Use Only

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