

M.F. TECHNICAL ENTERPRISES
47 BURRANDONG CRESCENT
BAULKHAM HILLS NSW 2153
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TAB – SYSTEM ORDER FORM AND TERMS

Dear TAB Manager,

Please fill in the appropriate details to ensure we provide you with the best level of installation advice for your ordered TAB Information systems. **Fax Completed form to 02 9620 4946.** If you have a project manager, builder or other relevant contractors involved with your TAB, please provide details on second page (if applicable). If you have any questions, please feel free to contact Mark Ferguson on the numbers listed. (9-5, Mon-Fri)

TAB/Venue : _____

Address: _____

Projected Opening Date: (If applicable) _____

Contact Name: _____

Phone Number: _____

Fax Number: _____

Email: _____

System Requirements (Please indicate how many if more than one)

TABVIEW INTERNET []

EFORM []

Qwiktext []

Other [] Specify: _____

Total of systems []

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TAB/Venue Contractor Details

(Where Applicable)

Builder/ Project Manger contact: _____

Data cabling contact: _____

Internet admin contact: _____

Electrical Contact: _____

A/V Contact: _____

Please supply relevant details to Mark Ferguson on 02 9620 4946.