

Phone:

Fax:

WAI Engineering ABN: 17 315 897 179

ABN: 17 315 897 179 2 Cumberland Street, Blacktown. NSW. 2148. Australia.

0418 203 229 (Int'l: +61 418 203 229) (02) 9622 0450 (Int'l: +61 2 9622 0450)

e-mail: accounts@wai.com.au



Ref: SUBCONTRREF.DOC

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SUB-CONTRACTOR REFERENCES

| Company Name: | | | | |
|---|---------------------------------|---------------------------------------|--|--|
| A.C.N / B.R.N / A.B.N. : | | | | |
| Registered Office: | | | | |
| | | | | |
| | | | | |
| Trading Name (if different to al | bove): | | | |
| Dootel Address. | , , | | | |
| - Ustai Address. | | · · · · · · · · · · · · · · · · · · · | | |
| | | ····· | | |
| | | · · · · · · · · · · · · · · · · · · · | | |
| Is your business a LIMITED CO | OMPANY/PARTNERSHIP/SOLE TR | RADER (delete not applicable) | | |
| If the company is acting as a ti | rust, state the NAME OF THE TRU | IST: | | |
| | | | | |
| Nature of Business: | | | | |
| How long has the business been operating: | | | | |
| Number of employees: | | | | |
| Name of Bank: | | | | |
| Branch: | | | | |
| Phone: | Fax: | e-mail: | | |
| Accountant: | | | | |
| Phone: | Fax: | e-mail: | | |
| Solicitor: | | | | |
| Phone: | Fax: | e-mail: | | |
| Insurance Company: | | | | |
| Insurance Policy Number: _ | | | | |
| Phone: | Fax: | e-mail: | | |



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| Sub-Contractor Reference | es | | | |
|---|------|--------------------|------------------------------------|-----|
| 1) | | | | |
| Type of work done: | | | | |
| Phone: | Fax: | · | e-mail: | |
| 2) | | | | |
| Type of work done: | | | | |
| Phone: | Fax: | | e-mail: | |
| 3) | | | | |
| Type of work done: | | | | |
| Phone: | Fax: | | e-mail: | |
| I/We the undersigned, subrinformation provided herein | | assist you to asso | ess me/us as suitable clients. All | the |
| Signed: | | Date: | | |
| Name/Title: | | | | |
| Signed: | | Date: | | |
| Name/Title: | | | | |