

TITAB AUSTRALIA

CABLER REGISTRY SERVICES

RENEWAL FORM FOR CURRENT TITAB REGISTRATION

TITAB REGISTRATION NUMBER: T	EXPIRY DATE:
NAME:	
POSTAL ADDRESS:	
SUBURB:	STATE:POSTCODE:
HOME ADDRESS (IF DIFFERENT):	
SUBURB:	STATE:POSTCODE:
HOME PHONE:	BUSINESS PHONE:
MOBILE PHONE:	FAX NUMBER:
EMAIL:	CURRENT_EMPLOYER:
SIGNATURE:	
TYPE OF REGISTRATION:	
□ OPEN CABLER REGISTRATION□ LIFT CABLER REGISTRATION	☐ RESTRICTED CABLER REGISTRATION
 □ STRUCTURED CABLING / CAT 5 / CAT 6 □ COAXIAL CABLING 	 □ OPTICAL FIBRE CABLING □ UNDERGROUND CABLING
☐ AERIAL CABLING	☐ CABLE SYSTEM TESTING
IF ADDING SPECIALISED COMPETENCIES OR UPDATING TO AN OPEN REGISTRATION PLEASE ATTACH A COPY OF THE RELEVANT STATEMENT OF ATTAINMENT OR CERTIFICATE.	
PLEASE NOTE THAT THIS <u>MUST</u> BE ATTACHED IN ORDER FOR YOUR REQUEST TO BE PROCESSED.	
□ CHEQUE OR MONEY ORDER PAYABLE TO 'TITAB' ENCLOSED	
Call (03) 9631 0800 to pay by credit card OR complete form below	
□ PAY BY CREDIT CARD: □ VISA □ MA	ASTERCARD AMEX
CARD NUMBER:	EXPIRY DATE:/
AMOUNT: 3 YEARS FOR \$94 (Incl GST) OR 1 YEAR FOR \$42 (Incl GST) \$	
NAME ON CARD:	DATE:
SIGNATURE:	

SEND TO:- info@titab.com.au or PO BOX 348 Carlton Sth Victoria 3053