



PLEASE NOTE:

DEPOSIT - \$20 CASH/CHEQUE/EFT

PHOTO ID REQUIRED:
DRIVER'S LICENCE/PASSPORT

APPLICATION FOR MARKET CITY ACCESS CARD

Family Name: _____ Given Name/s: _____

Address: _____

Phone: (W) _____ (M) _____

Email Address: _____

Employer: _____

Reason for access: Tenant/Employee Buyer Grower/Driver Contractor Other

Specify Other _____

Vehicle/s (Type & registration): _____

Buyers Code _____ Parking Bay/Area: _____

Forklift license number: _____ Driver's License/Passport _____

Your signature below indicates your understanding and acceptance of the following:
 You have received, reviewed and understood the PMA Site Safety Information and requirements and accept the conditions of entry to the site.

Key Points

- In the event of a fire or an emergency evacuation, follow the instructions of Fire Wardens and Market Management.
- You must wear reflective vests at all times and contractors must wear appropriate personal protective equipment (PPE) as required.
- Smoking is NOT permitted on these premises except in designated areas.

Signed: _____ Date: _____

EMPLOYER DECLARATION

I certify that the above-named person is an employee/authorized person of _____
Business Name
 and request the issue of an access card.

Signed: _____ Date: _____

OFFICE USE ONLY					
	Y	N		Y	N
Photo taken	<input type="checkbox"/>	<input type="checkbox"/>	Payment \$_____ received	<input type="checkbox"/>	<input type="checkbox"/>
I.D. sighted	<input type="checkbox"/>	<input type="checkbox"/>	Invoice raised	<input type="checkbox"/>	<input type="checkbox"/>

Processed by _____

Signature and Name

Date