|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Enable_CMYK | | | **ENAS004** | **JOB CARD**  **Finance@enable.co.nz 0800 362 253** | | | | | | |
| ***To be completed by the Equipment Subcontractor*** | | | | | | | | | | |
| **This job card is to be completed for any repairs and/or modifications to equipment funded through Enable New Zealand** | | | | | | | | | | |
| **EQUIPMENT DESCRIPTION** | | | | | | | | | | |
| **Make** |  | | | | **Model (if known)** | | |  | | |
|  |  | | | | **Asset Number** | | |  | | |
| **CLIENT DETAILS** | | | | | **SUBCONTRACTOR DETAILS** | | | | | |
| **Family Name** |  | | | | **Name** | | |  | | |
| **First Name** |  | | | | **Company Name** | | |  | | |
| **Date of Birth** | /  / | | | | **Address** | | |  | | |
| **Street Address** |  | | | | **Locality** | | |  | | |
| **Suburb** |  | | | | **Email** | | |  | | |
| **Town/City/Post Code** |  | | | | **Phone** | | |  | | |
| **Telephone Number** |  | | | | **Fax** | | |  | | |
| **Pick up or delivery address** |  | | | | **Mobile** | | |  | | |
|  |  | | | | **Stamp if available** | | | | | |
| **Contact Name** |  | | | |  | | | | | |
| **REPAIR/MODIFICATION DETAILS** | | | | | | | | | | |
| **Problem Identified** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Details of Repair/Modification** | | | | | | | | | | |
|  | | | | | | | | | | |
| **If equipment is written off please provide explanation** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Subcontractor Name** | |  | | | | **DATE IN** | /   / | | **DATE OUT** | /   / |
| **INVOICE DETAILS** | | | | | | | | | | |
| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | **Part** | **Number** | **Net (per unit)** | | | **+12.5%** | | **Total** | |  |  | $ | | | $ | | $ | |  |  | $ | | | $ | | $ | |  |  | $ | | | $ | | $ | |  |  | $ | | | $ | | $ | |  |  | $ | | | $ | | $ | |  |  | $ | | | $ | | $ | | Freight/Courier | | $ | | | $ | | $ | | Subtrade | | $ | | | $ | | $ | | Labour | | **Hours** |  | **@** | $ | *(per hour)* | $ | |  | *(net amount)* | | | Mileage Allowance (over 10km) | | $ | | |  | | $ | | **Total excluding GST** | | | | | | | **$** | | **Enable New Zealand Order Number** | |  | | | | | | | | | | | | | | | | |

.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Enable_CMYK | | | **ENAS004** | **JOB CARD**  **Finance@enable.co.nz 0800 362 253** | | | | | | | |
| **PLEASE COMPLETE THIS SECTION** only if you have added a new asset number | | | | | | | | | | |
| **ASSET DETAILS** | | | | | | | | | | |
| **Specifications** (*please tick all applicable*) | | | | | | | | | | |
| Self propelling | Transit | | | | Recliner | |  | |  | |
| Powered | Left control | | | | Right control | | Centre control | |  | |
| Amputee | Left | | | | Right | |  | |  | |
| Seat width | 35cm | | | | 40cm | | 45cm | | 50cm | |
| Child’s seat width - specify | |  | | | | cm | | | | |
| Seat depth | Standard (40cm or 45cm) | | | | | | other |  | | cm |
| Arm rests | Desk | | | | Full length | |  | |  | |
| Foot rests | Standard | | | | Elevating | | Left/Right | |  | |
| Other details and all other equipment types |  | | | | | | | | | |
|  |
|  |

|  |
| --- |
| **MAINTENANCE CHECK** |
| **Tick to indicate if OK or Repair Repaired**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Part** | **OK** | **Repair Required** | **Part** | **OK** | **Repair Required** | | Armrests |  |  | Motor |  |  | | Upholstery |  |  | Batteries |  |  | | Tyres |  |  | Charger |  |  | | Wheels |  |  | Electronics |  |  | | Castors |  |  | Other (identify below) |  |  | | Brakes |  |  |  | | | | Frame |  |  |  | | |   **Additional Comments**   |  | | --- | |  | |