

APPLICATION FORM BUYERS G.T.A ENTRY PASSES

BUSINESS TRADING NAME

I apply for Buyers G.T.A. Passes for the following principals and staff of this firm to allow them access to the G.T.A. during Buyer trading hours. I also undertake to return any G.T.A. Pass to Sydney Markets Limited when the holder of such pass ceases to be an employee. The holder will need to reapply for the buyers pass each year.

OFFICE USE ONLY

FAMILY NAME	GIVEN NAMES	POSTAL ADDRESS (INCLUDE POSTCODE)	PRINCIPAL/EMPLOYEE (MARK WHICH APPLICABLE)	DATE OF BIRTH	PASS NO. ISSUED	I.D SIGHTED (LICENSE NO)

Please circle which of the following categories best describes your business:

GREENGROCER	PROVIDORE	RESTAURANT	CATERING	HOSPITALITY	CANTEEN	EXPORTER	OTHER (SPECIFY)
-------------	-----------	------------	----------	-------------	---------	----------	-----------------

BUSINESS ADDRESS	CONTACT NUMBER	EMAIL	ABN	PARKING LOCATION

Contact Name:

Mobile No:

Signature of Principal/Director:

Note: Pass fees (\$55.00 inc GST) to be paid to the Sydney Markets Limited Cashier (D Market) before 9:00 am Monday to Friday.



**Application Form
Buyer GTA Entry
Passes**

CASHIER:

Receipt Number: _____ (attach duplicate receipt)

Signature:

Date:

PHOTO I.D. ROOM OPERATOR:

- Check application form Yes No
- Business Letter attached Yes No
- Receipt sighted Yes No
- Photo I.D. sighted Yes No
- Access areas given Yes No
- Photo taken Yes No
- Pass issued to Team Leader/applicant Yes No

TEAM LEADER:

Passes vetted Yes No

Names of Vettors: _____

Signature:

Date:

OPERATIONS MANAGER:

- Applicant's details complete Yes No
- All vetting levels complete Yes No

Signature:

Date:

TEAM LEADER/ASSISTANT TEAM LEADER:

Issue Pass Yes No

Signature:

Date: