

Stone Mason Registration Application
(To be completed by mason)

Business Name: _____

ABN: _____

Address _____

Contact Name: _____

Phone: _____ **Fax:** _____

Mobile: _____ **Email:** _____

I wish to apply for registration to install monuments.

I have attached:

- Completed Contractor Insurance Declaration
- Copies of Insurance Certificate of Currency
- Completed Contractor Occupational Health & Safety Declaration

Name: _____

Position _____

Signed _____ **Date:** ____ / ____ / ____