

# Client Architect Agreement

## Order form

# ARCHITEAM

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## Personal Details

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First Name: \_\_\_\_\_ Last name: \_\_\_\_\_

Practice Name: \_\_\_\_\_ AT Number \_\_\_\_\_

Postal Address: \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Email: \_\_\_\_\_ Mobile: \_\_\_\_\_

**Short Form**

**FREE**  
Suitable for projects with a total build of  
\$150,000 or less. Client can not be  
a company.

**Long Form**

**FREE**  
Suitable for all projects and clients.

## Terms and Conditions

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I accept the Terms and Conditions of purchasing a copy of this Client Architect Agreement

Applicants Signature:

Print Applicants Name: \_\_\_\_\_

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