

XML Upload Authorisation Form

1 Company Details

Business Name

ABN / ACN

Address Street or PO box

Suburb Postcode

Subscription Type

No charge until 1 July 2009

2 XML Bulk Load Provider

E.g. MyDesktop, OSL, ReNet, HubOnline, Rockend, Real Estate Office, Portplus

XML Provider Company Name

XML Provider Technical Person

XML Provider Contact Number

XML Provider Contact Email

3 Authorisation

Your Name

Your Signature

Website address

Contact Email

Contact Telephone

Date