**Australian Logistics Council   
Master Code Auditing Scheme** (**AMCAS**)   
Subscriber Application Form

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| **Subscriber Information** | | | | |
| **Company or Organisation**: | | | | |
| **Company or Organisation ABN:** | | | | |
| **Company or Organisation Representative:** | | | | |
| First name: | Surname: | | | |
| Position: | **Email:** | | | |
| **Phone (mobile):** | **Phone (work)**: ( ) | | | |
| **Postal Address:** | | | | |
| Office Location or PO Box: | | | | |
| Suburb: | State: | | Postcode: | |
| **Fee Structure (Tick applicable)** | | | | |
| **Small business** (carrier: less than 50 heavy vehicles, non-carrier: less than 50 contractors/employees) | |  | | $580.00 (ex GST) |
| **Medium business** (carrier: 50>99 heavy vehicles, non-carrier: 50>99 contractors/employees) | |  | | $2,890.00 (ex GST) |
| **Large business** (carrier: 100 or more heavy vehicles, non-carrier: 100 or more contractors/employees) | |  | | $5,780.00 (ex GST) |

**Privacy Note:**The above information is being collected, and will be held, by ALC for the purposes of administering the ALC Master Code Auditing Scheme.

**Agreement:**On behalf and with full authority of the applicant Subscriber I confirm that I have read, understood and accept the AMCAS Subscriber Licence Terms and Conditions.

Signed: ………………………………………….

Date: ………./………./……….

AMCAS
Australian Logistics Council
Master Code Auditing Service


An invoice will be generated upon receipt of this application

Applications may be emailed to: [amcas@austlogistics.com.au](mailto:karen.bow@austlogistics.com.au)