## **Corrective Services New South Wales**

## **Small Business Declaration Form**

Please complete information below and return back to CSNSW either by;

<u>Fax number</u>: (02) 8346 1560 <u>Email to</u>: <u>eprocurement@dcs.nsw.gov.au</u> Or return to the CSNSW officer requesting your business details.

## **1. SMALL BUSINESS DECLARATION**

The New South Wales government's payment of accounts policy defines a small business supplier as an Australian and New Zealand based firm with a turnover of less than \$2 million in the latest financial year.

I confirm that I am a small business supplier within the definition above.

## 2. CONFIRMATION OF EMAIL ADDRESS FOR TRANSMISSION OF TRADING DOCUMENTS.

Please advise an authorised email address for receipt of purchase orders.

Please advise an authorised email address for receipt of remittance advices.

I will advise you if my status as a small business supplier or email details changes in the future.

| YES NO                               |                                    |
|--------------------------------------|------------------------------------|
| Signed by Authorised representative. | Name (please print) Position Title |
| Company Name and address             | ABN number                         |

Corrective Services NSW Henry Deane Building, 20 Lee Street, Sydney NSW 2000; GPO Box 31 Sydney NSW 2001. Tel: 02 8346 1333 Fax 02 8346 1010. www.correctiveservice.nsw.gov.au