

CUSTOMER REGISTRATION FORM

The Waterexchange Pty Ltd ACN 084 332 132

BROKER DETAILS

Name

AWBA Reg No

CUSTOMER DETAILS

Surname

Initials

Company Name *(if applicable)*

Postal Address

Town

State

P/Code

ABN

Telephone

Facsimilie

Email

WATER LICENCE DETAILS

WAL, WEE, WEN or Land Holding Reference Number

Customer must provide the Broker with a recent water account statement from the Customer's Regulating Water Authority.

Acknowledgements

(Please cross out whichever is not applicable)

We/I acknowledge that We/I have read the Brokerage Agreement as Published on the Site of Waterexchange, www.waterexchange.com.au

We/I acknowledge and agree to be bound by the Terms and Conditions as set out in the Brokerage Agreement attached to this Registration Form.

Name of Broker

Name of Witness

Signed:

Signed:

Date:

Date:

Names of all Customers

Name of Witness

Signed by all customers:

Signed:

Date:

Date:

--- or if a company ---

Name of Director

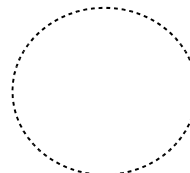
Signed:

Date:

Name of Secretary

Signed:

Date:



The Common Seal is affixed

by the authority of the

Board and in the presence of a

Director and the Secretary