



## INTERNET REQUEST FOR TRANSLATION

### Assignment details:

Date request submitted:

Due date:

Original language:

Target language:

Formatting required (please circle): Yes      No

### Client details:

Name/Company/Partnership/Trust:

Phone:

Person to contact:

Method of payment (no credit):

### Signing and acknowledgement:

I/We agree to comply with the Terms and Conditions expressed on this website. I/We acknowledge reading the Terms and Conditions. Where the client is a Company/Partnership/Trust, I/We acknowledge that I/We have authority to act on behalf of the Company/Partnership/Trust.

Signed:

Date:

*Bay of Plenty Interpreting Service, PO Box 841, Complex 1, upstairs, Main Street, Historic Village on 17th Avenue, Tauranga*