



Tablet Order Form

Scan & Email: tablet.support@energy.com.au or Fax: x35146

Part A

Depot: _____ Cost Centre: _____

Group: _____

Part B (✓ one only)

☐ New Tablet ☐ Replacement Tablet
(Fill in Part D & E only) (Fill in Part C, D & E)

Part C

☐ Faulty Details: _____
☐ Damaged (If damaged, please have user fill in Part F)
☐ Lost ☐ Stolen

(If lost or stolen, attach Security Incident Report to this form)

Tablet Serial No.: _____ Police Event No.: _____

Charging Box Damaged? ☐ Yes ☐ No

If yes, fill in Vehicle Mount Install/Repair Form as well.

Part D - User & Vehicle Details

Full Name: _____ Service No.: _____
Fleet No.: _____ Rego No.: _____
Make: _____ Model: _____
Vehicle Type: _____

Please tick option:
☐ Charging Box Mount
☐ Portable Pack
(Laptop bag & car charger)

Part E – Approvals

New tablet to be approved by Level 4 Manager only

Signature: _____ Date: _____

Name & Position: _____

Replacement tablet to be approved by Supervisor

Signature: _____ Date: _____

Name & Position: _____

Office Use Only: New Tablet Serial No. _____

