

**SCHEDULE 4
PARTICIPATING AGENCY SIGNATURE FORM**

OPEN SYNDICATED AGREEMENT FOR TELEPHONE INTERPRETING SERVICES

between (the **Participating Agency**)

and Intellicomms Pty Ltd T/A ezispeak (the **Service Provider**)

1. INTRODUCTION

- 1.1 The Participating Agency Agreement is formed on execution of this Participating Agency Signature Form by both parties.
- 1.2 The Commencement Date of the Participating Agency Agreement is
- 1.3 The Participating Agency Agreement comprises:
- (a) this Participating Agency Signature Form;
 - (b) the Terms and Conditions;
 - (c) Schedules 1 and 2 of the Terms and Conditions (but not, to avoid doubt, Schedules 2 to 5); and
 - (d) any Annexures to Schedules 1 and 2.

2. AGENCY REQUIREMENTS

2.1

3. DISPUTE MANAGERS

Dispute Manager (clause 17.3(a), Terms and Conditions):

Service Provider's Dispute Manager (clause 17.3(a), Terms and Conditions):
Rebecca Haynes, CEO and Managing Director, ceo@ezispeak.com.au, +61 3 9115 3001

Escalated Dispute Manager (clause 17.3(b), Terms and Conditions):

4. ADDRESS FOR NOTICES

For notices required to be provided to the Participating Agency:

Person:
Postal address:
Physical address:
Email address:
Copied to:
Person:
Postal address:
Physical address:
Email address:

For notices required to be addressed to the Service Provider:

Person:
Postal address:
Physical address:
Copied to:
Person:
Postal address:
Physical address:
Email address:

5. ADDRESS FOR INVOICES

Person:
Postal address:
Physical address:
email address:

Execution

Signed as an Agreement

SIGNED by by its duly authorised signatory

Signature

Name

Position

Date

SIGNED by Intellicomms Pty Ltd T/A ezispeak by
its duly authorised signatories

Signature

Name

Position

Date

**Please email form back to: sales@ezispeak.com.au
Please copy in: Fran.Albertario@mbie.govt.nz**