

Construction Materials Testing (CMT) Supplier Registration System**Application for Laboratory Registration**

Laboratory application Annex facility application Renewal

Laboratory

Company Name:	
ABN:	NATA Field of Accreditation:
NATA Accreditation No. :	NATA Corporate Site No. (if applicable):

Contact person	Name:
Telephone:	Email:

Address / location of laboratory or annex facility

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Postal address (as above)

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Checklist of Attachments

NATA Scope of Accreditation	<input type="checkbox"/>
Organisational structure (refer NATA CMT FAD)	<input type="checkbox"/>

NATA Authorised Representative

Name:	Signature:
	Date:

Please submit applications to cmt_supplier@tmr.qld.gov.au