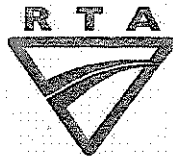


HEAVY VEHICLE
COMPETENCY BASED ASSESSMENT



SERVICE PROVIDER AGREEMENT
FOR
HEAVY VEHICLE
COMPETENCY BASED ASSESSMENT

PROVIDER'S NAME:- CHRISTOPHER Binos

17-06-08

DATE SIGNED:

VERSION 4.0

July 2008

DRIVER TESTING UNIT

ROADS AND TRAFFIC AUTHORITY

Enquiries: Phone: (02) 9843 3818 Fax: (02) 9843 3820

Last Printed: 1 May 2008

RECEIVED
17 JUN 2008
DRIVER TESTING

ENTERED

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ROADS AND TRAFFIC AUTHORITY OF NEW SOUTH WALES

HVCBA SERVICE PROVIDER AGREEMENT

CONTRACT DETAILS

NSW ICAC
EXHIBIT


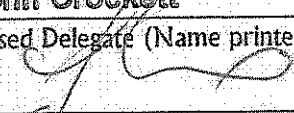


<p>Item 1</p>	<p>Details of Provider ("I", "my" or "me") <i>Name: CHRISTOPHER BINDS Trading As:</i> <i>ACN:</i> <i>Address:</i> <i>Phone:</i> _____ <i>Facsimile:</i> _____</p>																					
<p>Item 2</p>	<p>Address for service of notices RTA <i>Address: Driver Testing Section, Roads and Traffic Authority, Level 1, Cnr Charles and Macquarie Sts, Parramatta NSW 2124</i> <i>Facsimile: (02) 9843 3820</i> <i>Contact Name & Position: John Crockett, Manager Driver Testing Unit.</i> Provider <i>Address: -</i> Phone _____ <i>Facsimile:</i> _____ <i>Contact Name & Position: CHRISTOPHER BINDS</i> CONTRACTOR</p>																					
<p>Item 3</p>	<p>Commencement Date and Term (a) <i>Commencement Date:</i> (b) <i>Initial Term:</i> 31st July 2011 (c) <i>Renewal Term:</i> 3 years</p>																					
<p>Item 4</p>	<p>Provider Representative <i>CHRISTOPHER BINDS.</i></p>																					
<p>Item 5</p>	<p>Assessor/s (if insufficient space, add additional page to document, signed and dated by the Provider) <table border="0"> <thead> <tr> <th><i>Full Name and Address</i></th> <th><i>Assessor Type (eg 1, 2, 3 or 4)</i></th> <th><i>Assessor Number</i></th> </tr> </thead> <tbody> <tr> <td><i>CHRISTOPHER BINDS</i></td> <td><i>3.</i></td> <td><i>010559</i></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> </p>	<i>Full Name and Address</i>	<i>Assessor Type (eg 1, 2, 3 or 4)</i>	<i>Assessor Number</i>	<i>CHRISTOPHER BINDS</i>	<i>3.</i>	<i>010559</i>															
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<i>CHRISTOPHER BINDS</i>	<i>3.</i>	<i>010559</i>																				

**NSW ICAC
EXHIBIT**


Item 6	<p>Premises at which Records to be kept (clause 10)</p> <p><i>Premises Located At:</i></p>
Item 7	<p>Insurances (Clause 14 and Schedule B)</p> <p>(a) Worker's compensation insurance for not less than the minimum required under applicable legislation; <i>(not applicable to self providers - refer to Schedule B for whom constitutes a self provider)</i></p> <p>(b) Public Liability insurance for not less than \$10,000,000 in respect of any single occurrence;</p> <p>(c) Professional Indemnity insurance for not less than \$5,000,000 in respect of any single occurrence;</p> <p>(d) Motor Vehicle Comprehensive Insurance for not less than \$5,000,000 in respect of any single occurrence.</p>

The RTA has developed, in consultation with relevant industry representatives, an Assessment process for drivers who wish to qualify for a Heavy Vehicle Drivers Licence. I have applied to manage, administer and co-ordinate various activities connected with the Assessment of Applicants and the RTA has accepted my application. The RTA has agreed to appoint me on a non-exclusive basis to provide Assessments of Applicants and I have accepted the appointment, subject to the attached terms and conditions (Terms and Conditions). I acknowledge I have read and understood the Terms and Conditions.

EXECUTED as an agreement.

<p>Signed for and on behalf of ROADS AND TRAFFIC AUTHORITY OF NEW SOUTH WALES by its Authorised Delegate in the presence of:</p> <p></p> <p>Authorised Delegate (signature)</p> <p>John Crockett</p> <p>Authorised Delegate (Name printed)</p> <p></p> <p>Witness (signature)</p> <p>Jimmy Lee</p> <p>Witness (Name printed)</p> <p>Date: 17 JUN 2008</p>	<p>Signed for and on behalf of THE PROVIDER by its Authorised Representative in the presence of:</p> <p></p> <p>Authorised Representative (signature)</p> <p>CHRISTOPHER BINIOS</p> <p>Authorised Representative (Name printed)</p> <p></p> <p>Witness (signature)</p> <p>Jimmy Lee</p> <p>Witness (Name printed)</p> <p>Date: 17.6.08</p>
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This section to be signed by all Assessors listed in Item 5 of the Contract Details who each acknowledge that they have read, understood and agree to be bound by the Terms and Conditions.

Name (Print)	Assessor Number	Date	Signature
CHRISTOPHER BINIOS	010559	17.06.08	

**NSW ICAC
EXHIBIT**

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