

Purchase Order Particulars Table	Purchase Order No: Click or tap here to enter text.								
<p>This Purchase Order Particulars Table (P) forms a part of the Purchase Order (agreement/contract) that is formed between the person or entity named in Purchase Order Cover Page and Saunders International Limited, or any of its affiliates identified on the Purchase Order Cover Page.</p> <p>The Purchase Order is made up of the following documents:</p> <ul style="list-style-type: none"> (i) Purchase Order Cover Page (ii) Purchase Order Particulars Table (P) [this table] (iii) Saunders Standard Conditions of Purchase (as referenced or attached) (iv) Any other documents referenced in the Purchase Order Cover Page or the Purchase Order Particulars Table <p>The contents of this table take precedence over any conflicting parts of the Purchase Order.</p>									
Services <i>(general description)</i>									
Design Included in the Services <i>(if included, Clause 31 of the Standard Conditions of Purchase applies)</i>	Included <input type="checkbox"/> Not Included <input type="checkbox"/>								
Completion date for Services <i>(or delivery of Goods)</i>									
Defects Liability Period <i>(if varied from Standard Conditions of Purchase)</i>									
Purchase Order Price <i>(if not stated in the Purchase Order)</i>									
Payment terms <i>(if varied from the Standard Conditions of Purchase)</i>									
Liquidated damages – if applicable <i>(Clause 11 - Standard Conditions of Purchase)</i>	<table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 60%;">Rate:</td> <td style="border: none; width: 40%;">Per day <input type="checkbox"/> Per week <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Cap amount:</td> <td style="border: none;">\$</td> </tr> </table>	Rate:	Per day <input type="checkbox"/> Per week <input type="checkbox"/>	Cap amount:	\$				
Rate:	Per day <input type="checkbox"/> Per week <input type="checkbox"/>								
Cap amount:	\$								
Insurance									
Public Liability Insurance <i>(if varied from Standard Conditions of Purchase – \$20M per occurrence)</i>	<table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 30%;">Required</td> <td style="border: none; width: 10%; text-align: center;"><input type="checkbox"/></td> <td style="border: none; width: 30%;">Not required</td> <td style="border: none; width: 10%; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="4" style="border: none;">Other Amount (if applicable):</td> </tr> </table>	Required	<input type="checkbox"/>	Not required	<input type="checkbox"/>	Other Amount (if applicable):			
Required	<input type="checkbox"/>	Not required	<input type="checkbox"/>						
Other Amount (if applicable):									
Professional Indemnity Insurance <i>(if varied from Standard Conditions of Purchase – \$5M per claim and \$10M in the aggregate)</i>	<table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 30%;">Required</td> <td style="border: none; width: 10%; text-align: center;"><input type="checkbox"/></td> <td style="border: none; width: 30%;">Not required</td> <td style="border: none; width: 10%; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="4" style="border: none;">Other Amount (if applicable):</td> </tr> </table>	Required	<input type="checkbox"/>	Not required	<input type="checkbox"/>	Other Amount (if applicable):			
Required	<input type="checkbox"/>	Not required	<input type="checkbox"/>						
Other Amount (if applicable):									
Workers Compensation Insurance	<table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 30%;">Required</td> <td style="border: none; width: 10%; text-align: center;"><input type="checkbox"/></td> <td style="border: none; width: 30%;">Not required</td> <td style="border: none; width: 10%; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Per statute</td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> <td colspan="2" style="border: none;"></td> </tr> </table>	Required	<input type="checkbox"/>	Not required	<input type="checkbox"/>	Per statute	<input type="checkbox"/>		
Required	<input type="checkbox"/>	Not required	<input type="checkbox"/>						
Per statute	<input type="checkbox"/>								
Other Insurance									
Special Conditions									

Particulars Table (P-Professional Services)

	List other Inclusions / Attachments