

92 Grange Road WELLAND S.A. 5007

## **Credit Application**

## "For all Engineering and Industrial Supplies"

CUSTOMER DETAILS	
Trading Name:	Telephone
Business Address:	Facsimile:
Postcode	E-mail Address:
D. Correspondents	
Business Contacts:	
Accounts Payable:	E-mail Address:
<ul> <li>Purchasing Officer</li> </ul>	E-mail Address:
<ul><li>Website</li><li>Address</li></ul>	
Address	<u></u>
CUSTOMER INFORMATION	
Registered	Not Please tick if not applicable
Business Name:	Applicable:
Company Name:	A.B.N.
D : 1 10"	1 100
Registered Office Address	A.C.N.
Addition	
Postcode:	Date Inc.
	State Inc.
IF TRUSTEE OF TRUST:	<u> </u>
Name:	Date Commenced
<u>-</u>	<u>'</u>
Names of Related	
Companies:	

## PROPRIETOR / DIRECTOR's DETAILS

Full Name (s) and address (es) of Sol	e Traders, Partners, Directors:		-
Name:		Telephone:	
Address:		Postcode:	
Name:		Telephone:	
Address:		Postcode:	
Nama		Talanhana	
Name:		Telephone:	<del> </del>
Address:		Postcode:	
			-
Name:		Telephone:	
Address:		Postcode:	
			-
Has any Proprietor / Partner / Director	been registered under any part of the B	ankruptcy Act or any Sp	pecial Financial Arrangement? Tick IF NA
If YES – provide details in space below	W.		
FINANCIAL INFORMATION			
Expected Monthly Purchases			
TD 4 D = D = E = E = E = E = E = E = E = E =	\$	Sales Ex.No.	
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TRADE REFERENCES Company:	\$		
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## **APPLICATION FOR CREDIT**

The Customer applies for, and the Guarantor (s)( if applicable), request (s) Collins Industrial Distributors Pty. Ltd. to open a Credit Account in the name of the Customer and to supply Goods and / or Services to the Customer, and agrees to be bound by the Terms and Conditions of Sale appended hereto.

	lo	leclare that by authorizing this	form – it binds the applicant	s as a written
		Authorised Signature	☐ Tick	
			Signature	
		Date	: / /	
		Authorised Signature to	Terms and Conditions	☐ Tick
			Signature	
			Print Signature	
And indicate if: (tick be	ox) 3 1 7 1 L	outors		
Sole Trader				
Partner				
Director				
Of if Employee		Position held:		