



CREDIT APPLICATION FORM

BUSINESS INFORMATION		DESCRIPTION OF BUSINESS	
NAME OF BUSINESS:		TYPE OF BUSINESS:	
ADDRESS:		DATE ESTABLISHED:	
PHONE: FAX:		BUSINESS STRUCTURE:	
EMAIL:		CORPORATION LIMITED	
WEBSITE:		PARTNERSHIP PROPRIETORSHIP	
ACCOUNT CONTACT: PHONE:		TRADE CONTACT:	
BANK REFERENCES			
NAME OF BANK:		BRANCH:	
ADDRESS:		ACCOUNT NO:	
TRADE REFERENCES			
BUSINESS NAME	ADDRESS	PHONE NUMBER	FAX NUMBER
1			
2			
3			
AMOUNT OF CREDIT REQUIRED:		PLEASE NOTE: ALL TRADING IS GOVERNED BY OUR TERMS AND CONDITIONS OF SALE (SEE WEBSITE)	
ALL APPLICATIONS MUST BE COMPLETED IN FULL, SIGNED AND ACCOMPANIED BY A LETTERHEAD.			
SIGNATURE:		POSITION:	
POLICY STATEMENT			
<p>BY SIGNING THIS APPLICATION, YOU AGREE TO PAY ALL INVOICES WITHIN THE STATED TERM PERIOD. OUR PAYMENT TERMS ARE STRICTLY 28 DAYS FROM DATE OF INVOICE. NEW CUSTOMERS WILL HAVE TERMS AGREED PRIOR TO DESPATCH. CUSTOMERS WHO HAVE ARRANGED MONTHLY ACCOUNTS MUST SETTLE BY THE 14TH OF THE MONTH FOLLOWING STATEMENT, I.E. ALL JANUARY INVOICES TO BE CLEARED BY 14TH FEBRUARY.</p> <p>IN ORDER TO RECOVER ANY OUTSTANDING DEBTS WE WILL EMPLOY THE SERVICES OF A DEBT COLLECTION AGENCY. ON INSTRUCTION TO RECOVER A DEBT, A SURCHARGE OF 15% WILL AUTOMATICALLY BE ADDED.</p> <p>INTEREST AND FURTHER LEGAL COSTS INCURRED WILL BE PASSED DIRECTLY TO THE CUSTOMER</p>			