

# CREDIT ACCOUNT APPLICATION

To Be Completed By Applicants - Please complete all sections and read the Terms and Conditions of Trade attached.

<b>Business Details</b> <input type="checkbox"/> Sole Trader <input type="checkbox"/> Trust <input type="checkbox"/> Partnership <input type="checkbox"/> Company				
Company Name:			Company No:	
Trading Name:			Date Incorp:	
Physical Address:				Postcode:
Billing Address:				Postcode:
Email Address:			Phone No:	
Alternative Email Address:			Fax No:	
Nature of Business:				
Paid Up Capital: \$		Credit Limit Required: \$		Estimated Monthly Purchases: \$
Principal Place of Business is: <input type="checkbox"/> Rented <input type="checkbox"/> Owned <input type="checkbox"/> Mortgaged ( <i>to whom</i> )				
<b>Directors / Owners / Trustee</b> (if more than two, please attach a separate sheet)				
(1) Full Name:			D.O.B.	
Private Address:				Postcode:
Driver's Licence No:		Phone No:		Mobile No:
(2) Full Name:			D.O.B.	
Private Address:				Postcode:
Driver's Licence No:		Phone No:		Mobile No:
<b>Account Terms</b> <input type="checkbox"/> 20 Days from EOM <input type="checkbox"/> 7 Days following Invoice <input type="checkbox"/> COD <input type="checkbox"/> Other:				
Purchase Order Required: <input type="checkbox"/> YES <input type="checkbox"/> NO		Accounts to be emailed? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Accounts Email Address:				
Accounts Contact:		Phone No:		Mobile No:
Bank and Branch:			Account No:	
<b>Trade References</b> (please provide companies that are willing to do trade references)				
Name		Address		Phone / Fax / Email:
1.				
2.				
3.				

I certify that the above information is true and correct and that I am authorised to make this application for credit. I have read and understand the TERMS AND CONDITIONS OF TRADE (attached) of Northern Frame & Prefab Ltd which form part of, and are intended to be read in conjunction with this Credit Account Application and agree to be bound by these conditions. I authorise the use of my personal information as detailed in the Privacy Act clause therein. ***I agree that if I am a director/shareholder (owning at least 15% of the shares) of the Client I shall be personally liable for the performance of the Client's obligations under this contract.***

SIGNED (CLIENT): \_\_\_\_\_ SIGNED (NFPL): \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Position: \_\_\_\_\_ Position: \_\_\_\_\_

WITNESS TO CLIENT'S SIGNATURE:

Signed: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

OFFICE USE ONLY				
ACC / Ref No	CREDIT LIMIT	APPROVED BY	DATA INPUTTED	DATE
	\$			/ /