



Factory Rd, Milawa, Victoria, 3678
T: (03) 5727 3589
F: (03) 5727 3590
E: info@milawacheese.com.au
W: www.milawacheese.com.au

Application for Credit Account

Business Name:	
Trading As:	ABN:
Postal Address:	
Delivery Address:	
Phone:	Mobile:
Email:	
Owners/Directors: _____ _____ _____	
Trade Reference	
Name _____	P: _____
Name _____	P: _____
Name _____	P: _____
Anticipated Monthly Purchases \$	

Signatories:

I certify that the above information is true and correct and that I am authorised to make this application for credit. In accordance with the Privacy Act (1988) I authorise any person or company to give information as may be required in response to credit inquiries. I have read and understand the TERMS AND CONDITIONS of Milawa Cheese Company which form part of, and are intended to be read in conjunction with this Credit Application and agree to be bound by these conditions.

Director/Authorised Person: Name (please print) _____
Title and Email _____
Signature _____

Other Contact Details (Name and Email)

Accounts:
Orders:
Others (Warehouse, Marketing QA etc)