

CREDIT ACCOUNT APPLICATION

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

Type of Business: <input type="checkbox"/> Sole Trader <input type="checkbox"/> Trust <input type="checkbox"/> Partnership <input type="checkbox"/> Company				
Company Name:			Company No:	
Trading Name:				
Physical Address:			Postcode:	
Billing Address:			Postcode:	
Email Address:		Phone No:		
Alternative Email Address:		Fax No:		
Directors / Owners / Trustee (if more than two, please attach a separate sheet)				
Full Name:			D.O.B.	
Private Address:			Postcode:	
Driver's Licence No:	Phone No:	Mobile No:		
Full Name:			D.O.B.	
Private Address:			Postcode:	
Driver's Licence No:	Phone No:	Mobile No:		
Date Business / Company Established: (Current Owners)			Credit Limit Required: \$	
Nature of Business:		Paid Up Capital:	Estimated Monthly Purchases: \$	
Principal Place of Business is: <input type="checkbox"/> Rented <input type="checkbox"/> Owned <input type="checkbox"/> Mortgaged (to whom):				
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:	
Account Terms: <input type="checkbox"/> 20 Day <input type="checkbox"/> COD <input type="checkbox"/> Other:				
Trade References: (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 (overleaf or attached) of Classique International 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 Customer I shall be personally liable for the performance of the Customer's obligations under this contract.**

SIGNED (CUSTOMER): _____ **SIGNED (SELLER):** _____

Name: _____ Name: _____

Position: _____ Position: _____

WITNESS TO CUSTOMER'S SIGNATURE:

Signed: _____ **Name:** _____ **Date:** _____

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