

# CREDIT ACCOUNT APPLICATION

Please complete all sections and read the Terms and Conditions of Trade overleaf or attached.

**Customer's Details:**  Individual  Sole Trader  Trust  Partnership  Company  Other:

Full or Legal Name: \_\_\_\_\_

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

Nature Of Business: \_\_\_\_\_

Physical Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Previous Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Billing Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Solicitors Firm: \_\_\_\_\_ Partner: \_\_\_\_\_ Phone No: \_\_\_\_\_

Accountants Firm: \_\_\_\_\_ Partner: \_\_\_\_\_ Phone No: \_\_\_\_\_

**Personal Details:** (To be completed by individual applicants, if more than one, please attach a separate sheet)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Driver's Licence No: \_\_\_\_\_ Phone No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Private Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

**Business Details:** (To be completed by Sole Traders, Trust, Partnerships, Companies or Other – as specified)

Company Number: \_\_\_\_\_ Paid Up Capital: \$ \_\_\_\_\_ Date Incorp. (current owners): \_\_\_\_\_

Estimated Annual Purchases: \$ \_\_\_\_\_ GST No: (if applicable) \_\_\_\_\_

Maximum Credit Requested: \$ \_\_\_\_\_ If over \$10,000, are annual accounts available?  Yes  No

Business Premises:  Owned  Rented  Mortgaged (to whom): \_\_\_\_\_

Directors / Owners / Trustee (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: \_\_\_\_\_

**Privacy Officer Contact Name:**

Email: \_\_\_\_\_ Phone No: \_\_\_\_\_

**Account Terms:**  7 Days  20 Days  COD  Other:

Purchase Order Required?  YES  NO Accounts to be emailed?  YES  NO

Accounts Email: \_\_\_\_\_

Accounts Contact: \_\_\_\_\_ Phone No: \_\_\_\_\_

Bank and Branch: \_\_\_\_\_ Account No: \_\_\_\_\_

**Trade References:** (please provide companies that are willing to do trade references)

Name:	Location:	Phone / Email:	Average Monthly Spend
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I certify that the above information is true and correct and that I accept the supply of credit by by Insinc Products Limited (IPL). I have read and understand the TERMS AND CONDITIONS OF TRADE (overleaf or attached) of Insinc Products Limited which form part of, and are intended to be read in conjunction with this Credit Application Form and agree to be bound by these conditions. I authorise the use of my personal information as detailed in the Privacy Act clause therein

**SIGNED (CUSTOMER):** \_\_\_\_\_ **SIGNED (IPL):** \_\_\_\_\_

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

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

Date: \_\_\_\_\_ Date: \_\_\_\_\_

