

Credit Application Form

Registered Name of Company:			
Trading Name: (if Different from above)			
ABN:		ACN:	
Registered Address:			
Postal Address:			
Telephone Number		Fax Number:	
Accounts Payable Contact:		Accounts Email:	
Invoicing (Please tick)	<input type="checkbox"/> Please send an Invoice with Goods		
	<input type="checkbox"/> Please Mail Invoice to the above Postal Address		
Purchasing Contact:		Purchasing Email:	
Nature of Business:			
Structure of Business: (Please tick)			
<input type="checkbox"/> Public Company	<input type="checkbox"/> Proprietary Company	<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Trader
Details of Proprietors / Directors:			
Name(s):	Email Address(es):		
Date Established:		Credit Limit Requested:	
Bank:		Branch:	
TRADE REFERENCES: (Major Suppliers Only please)			
Company Name:	Email Address	Contact Numbers	
		Tel:	
		Tel:	
		Tel:	
<u>IT IS UNDERSTOOD THAT CREDIT IS GIVEN ON THE FOLLOWING CONDITIONS:</u>			
TERMS OF PAYMENT: Payment must be made within 30 days from invoice date, on which the goods are purchased, unless otherwise agreed in writing by this company. In the event of a dispute concerning any invoice, the terms of payment will still apply to the balance of the debt.			
Credit will be automatically stopped in the event that any amount is 45 days outstanding. 1.5% Administration Fee will apply to outstanding payments over 90 days.			
Should it be necessary to send the overdue account to a collection agency, you will incur collection costs over and above the original debt, and we may take whatever action we deem necessary to recover this debt.			
All goods remain the property of Victoria Lub Pty Ltd until payment is received in full.			
MINIMUM ORDER VALUE: Minimum order value of \$100.00 (ex GST) applies to all orders.			
PERSON WITH COMPANY'S AUTHORITY TO SIGN THIS CREDIT APPLICATION			
SIGNED:		PRINTED NAME:	
DATED:		TITLE:	