

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: Sole Trader <input type="checkbox"/> Trust <input type="checkbox"/> Partnership <input type="checkbox"/> Company <input type="checkbox"/>				
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: 30 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 AJ Greaves Electrical Limited T/A Greaves Electrical 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 (CONTRACTOR):** _____

Name: _____ Name: _____

Position: _____ Position: _____

WITNESS TO CLIENT'S SIGNATURE:

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

This is a Credit Account Application Form under the Construction Contracts Act 2002. If you are a **"Residential Occupier"** please read clause 25 on the reverse.

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