SOUTH PACIFIC
TRADE & INVESTMENT CO.LTD

151 Marua Road Ellerslie, Auckland
PO Box 128546 Remuera, Auckland
Ph: 09 579 4444
Email: southpacificfurniture@gmail.com
www.sleepmax.co.nz

APPLICATION FOR COMMERCIAL CREDIT ACCOUNT(CONFIDENTIAL)

COMPANY NAME: _____

TRADING AS (if different from above):_____

REG NUMBER: _____ WEB ADDRESS: _____

NATURE OF BUSINESS: _____

BUSINESS ADDRESS: _____ POST CODE _____

POSTAL ADDRESS: _____ POST CODE _____

TELEPHONE NO.: _____ Mobile NO.: _____

FINANCIAL CONTROLLER: _____ TEL: _____

ACCOUNTS PAYABLE CONTACT: _____ TEL: _____

CLIENT GST NO: _____

SALE OR DELIVERY EMAIL ADDRESS: _____

INVOICE&STATEMENT EMAIL ADDRESS: _____

CREDIT APPLICATION CREDIT LIMIT REQUESTED FOR AMOUNT OF: $_____ PER MONTH

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Directors

Name of Director 1 _____ Address _____ Tel_____

Name of Director 2 _____ Address _____ Tel_____

Name of Director 3 _____ Address _____ Tel_____

Name of Director 4 _____ Address _____ Tel_____

COMMERCIAL TRADE REFERENCES:

(Minimum six (6) months trade, please do not supply utility companies or courier companies)

	COMPANY NAME	PHONE NO.	CONTACT	CREDIT LIMIT
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

I/We warrant that the information in this application is correct and that should there be any change in the circumstances of us with respect to any matters I/We will notify the Company in writing giving details of that change within fourteen (14) days of that change occurring.



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I/We agree that (1) the Company have the right to charge interest on all outstanding monies up to 3 percent per month; (2) any costs incurred in collection of be for our account; (3) ownership of or property in any goods purchased under these credit terms will not pass to the buyer until full payment has been made. (4) For any of new account prepaid will be required for first at least 6 months since first delivery start. (5) As Director/Directors of the above company I/We jointly and severally accept liability for credit extended on this Credit Application and we undertake to pay services by you if the company fails to meet its obligations under this Application.
I/We authorize the Company to obtain information from any source in accordance with the Privacy Act 1993 in considering the Customer's application for credit.

Full Name: _____ **Title:** _____

Signed: _____ **Date:** _____

Full Name: _____ **Title:** _____

Signed: _____ **Date:** _____

Full Name: _____ **Title:** _____

Signed: _____ **Date:** _____

Full Name: _____ **Title:** _____

Signed: _____ **Date:** _____