



# CREDIT APPLICATION

ABN 44 287 490 704

P O BOX 229

Phone: (61 8) 9240 8177

KARRINYUP WA 6921

Fax: (61 8) 9240 8299

Date of Application: \_\_\_\_\_

Email: info@quintzillion.com.au

Website: [www.quintzillion.com.au](http://www.quintzillion.com.au)

Trading Name: _____	ABN: _____
Other Trading Name: _____	ABN: _____
Other Trading Name: _____	ABN: _____
<input type="checkbox"/> Trust <input type="checkbox"/> Sole Trader <input type="checkbox"/> Partnership <input type="checkbox"/> Registered Company	No. of years trading in this name: _____
Company Name: _____	
Trading Address: _____	
	P/code: _____
Telephone: _____	Mobile: _____
	Fax: _____
Bank: _____	
Branch & Account No: _____	Email Address: _____

## Owners or Directors Information

Name: _____	Name: _____
Private Address: _____	Private Address: _____
_____	_____
Telephone: _____	Telephone: _____
Drivers Lic No: _____	Drivers Lic No: _____

## Trade References

1. Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Email: \_\_\_\_\_
2. Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Email: \_\_\_\_\_

*I consent to the supplier obtaining information from the above mentioned referees in support of this application. All information, as supplied is correct to the best of my/our knowledge.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
 Position: \_\_\_\_\_

## Trading Terms

I/we understand the trading terms as read overleaf.

Date: \_\_\_\_\_ Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_  
 Witness: \_\_\_\_\_ Witness: \_\_\_\_\_

## Personal Guarantee

I/we guarantee payment of any and all accounts for goods purchased by the above company together with any legal or out of pocket expenses associated with the collection of any outstanding monies. I/we understand this guarantee binds me personally.

Date: \_\_\_\_\_ Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_  
 Witness: \_\_\_\_\_ Witness: \_\_\_\_\_

**SUPPLIER’S TRADING TERMS AND CONDITIONS**

- 1. Should there be any constitutional change in the business, we will notify **Quintzillion** in writing of the change and agree that until notification in writing from **Quintzillion** accepting this change is received we agree to accept liability as if no such change had taken place.
- 2. Payment is due 25 days from invoice date.
- 3. You will pay any collection costs (including legal expenses and debt collection commissions) incurred in obtaining payment of the original debt.
- 4. Interest will be charged at 1% per month on overdue amounts.
- 5. We the person(s) named and described will guarantee on a continuing basis the payment by the company to the creditor of all monies now due and owing and to become due and owing from time to time in respect of credit given inclusive of costs in clause 3 and 4 above.
- 6. Ownership of goods supplied shall not pass until payment has been received by **Quintzillion**.

I CERTIFY THAT THE INFORMATION ON THIS FORM IS CORRECT, AND THAT I AM OVER THE AGE OF 18. I UNDERSTAND THE CREDIT TERMS TO BE PAYMENT IN 25 DAYS FROM INVOICE DATE AND THAT INTEREST AT 1% PER MONTH WILL BE CHARGED ON OVERDUE ACCOUNTS. I AGREE THAT YOU ARE ENTITLED TO:

- 1. ACCESS THE FILES OF ANY CREDIT BUREAU TO ASCERTAIN MY/OUR CREDIT PROFILE WHEN ASSESSING THIS APPLICATION AND AT ANY TIME DURING THE CURRENCY OF MY/OUR ACCOUNT WITH YOU.
- 2. DISCLOSE THE EXISTENCE AND THE CONDUCT OF MY/OUR ACCOUNT WITH YOU, WHETHER STILL CURRENT OR NOT, TO ANY CREDIT BUREAU OR CREDIT GRANTOR.

DATE: \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_