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CREDIT ACCOUNT APPLICATION

To Be Completed By Applicants - Please complete all sections and read the Terms and Conditions of Trade overleaf or attached.

DATE:	REF No
CUSTOMER'S TRADE NAME:	
CUSTOMER'S FULL or LEGAL NAME:	
Phone:	Fax:
Mobile:	Email:
Billing Address:	
	State: Postcode:
COMMERCIAL CUSTOMERS ONLY	ABN/ACN Number:
Requested Credit Limit:	Date Established:
Contact 1:	Contact 2:
Position:	Position:
Phone:	Phone:
DETAILS OF OWNER (If Sole Trader) PARTNERS (If Partnersh	ip) OR DIRECTORS (If Company) OR TRUSTEE (If a Trust)
Full Name:	Full Name:
Home Address:	Home Address:
State: Postcode:	State: Postcode:
ID: Date of Birth: (Driver's Licence, Passport, etc.)	ID: Date of Birth: Date of Birth:
Home Phone:	Home Phone:
TRADE REFERENCES	
Business Name 1:	Address or A/C No:
Phone:	Fax:
Business Name 2:	Address or A/C No:
Phone:	Fax:
Business Name 3:	Address or A/C No:
Phone:	Fax:
TERMS AND CONDITIONS OF TRADE (overleaf or attached) of in conjunction with this Credit Account Application and agree to be	am authorised to make this application for credit. I have read and understand the f Qualtech Pty Ltd T/A Qualtech which form part of, and are intended to be read be bound by these conditions. I authorise the use of my personal information as director/shareholder (owning at least 15% of the shares) of the Customer I per's obligations under this contract.
SIGNED (CUSTOMER):	SIGNED (QUALTECH):
Name:	Name:
Position:	Position:
WITNESS TO CUSTOMER'S SIGNATURE:	
Signed	Name: Date: