

**Torquay Mitre 10**  
 14-16 Baines Court, Torquay, Vic. 3228  
 PO Box 502, Torquay, Vic. 3228  
 ABN 92 590 828 926

**Tel: (03) 5261 3855 Fax: (03) 5261 2137**

**APPLICATION FOR CREDIT ACCOUNT**

|  |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
|--|--|--|--|--|

Date \_\_\_\_\_

|                            |                                                                                              |                                                                                    |
|----------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| Trading Name               |                                                                                              | Registered Business Name? Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Company Name/<br>Applicant |                                                                                              | ACN / ABN.                                                                         |
| Physical Address           | Postcode                                                                                     | Phone                                                                              |
| Postal Address             | Postcode                                                                                     | Fax                                                                                |
| Nature of Business         | Years in Business                                                                            | Mobile                                                                             |
| Email Address              |                                                                                              | Website URL                                                                        |
| Business Premises          | Own <input type="checkbox"/> Buying <input type="checkbox"/> Leased <input type="checkbox"/> | Mortgage from/<br>Landlord Name                                                    |

**Directors Information**

|                     |                     |
|---------------------|---------------------|
| <b>1. Full Name</b> | <b>2. Full Name</b> |
| Home Address        | Home Address        |
| Home Phone          | Home Phone          |
| <b>3. Full Name</b> | <b>4. Full Name</b> |
| Home Address        | Home Address        |
| Home Phone          | Home Phone          |

**Trade References (suppliers where you are currently buying on credit)**

|                                                                                                             |                                                                                                      |                    |
|-------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------|
| 1. Name                                                                                                     | Phone                                                                                                |                    |
| 2. Name                                                                                                     | Phone                                                                                                |                    |
| 3. Name                                                                                                     | Phone                                                                                                |                    |
| Name of Bank                                                                                                | Branch                                                                                               |                    |
| External Accountant                                                                                         | Phone                                                                                                | Paid Up Capital \$ |
| Credit Limit requested \$                                                                                   | Memberships MBA <input type="checkbox"/> HIA <input type="checkbox"/> Other <input type="checkbox"/> |                    |
| Written purchase order required for all purchases? YES <input type="checkbox"/> NO <input type="checkbox"/> |                                                                                                      |                    |
| If No, names of persons authorised to purchase on the account                                               | 1.                                                                                                   |                    |
| 2.                                                                                                          | 3.                                                                                                   |                    |

**TERMS OF TRADING & CONDITIONS OF SALE OVERLEAF TO BE SIGNED BY APPLICANT/DIRECTOR/COMPANY SECRETARY. GUARANTEE OVER LEAF TO BE SIGNED BY ALL DIRECTORS.**

TERMS OF TRADING & CONDITIONS OF SALE

In consideration of Torquay Mitre 10. (the Company) opening at my/our request a credit account in the name below, I/we agree to be bound by the following terms:

- 1. ALL TERMS ARE STRICTLY NET 30 DAYS, with settlement due on the 25th day of the month following the month of purchase / delivery of the goods.
2. Accounts not settled by that time will attract a late payment fee.
3. Credit facilities may be withdrawn without notice on overdue accounts or at the company's discretion.
4. The Company supplies goods on the condition that property in the goods will not pass to the customer until they have been paid for in full but goods are at the risk of the customer or agent upon purchase/delivery.
5. Any goods returned must be in original condition and with packaging intact.
6. If the Company considers it relevant to assessing this application for credit or considers it relevant to collecting overdue payments in respect of credit provided to me, I/we agree to the Company obtaining from a credit reporting agency a credit report containing personal credit information about me/us.

I/we confirm that the information supplied on this application is true and correct.

Signed for & and behalf of (name of Company or Individual) .....

Authorised Signature ..... Date .....

Print name ..... Title .....

GUARANTEE

To: Torquay Mitre 10. ("the supplier") 14-16 Baines Court. Torquay, Vic. 3228
The Customer .....
Address: .....

- 1. The signatory or signatories to this document ("the Guarantor(s)") request the supplier to open a credit account in the name of the customer on the terms of trading and conditions of sale set out above.
2. Should the application for credit be approved in favour of the customer, then in consideration of such approval, the Guarantor(s) do hereby for ourselves and our respective executors and administrators jointly and severally covenant with the supplier that if at any time default shall be made in payment of any monies payable by the customer to the supplier we will forthwith on demand by the supplier pay to it the whole of such monies which shall then be due and payable to the supplier.
3. The Guarantor(s) will keep the supplier indemnified against all losses, costs, charges and expenses whatsoever which the supplier may incur by reason of any default on the part of the customer in complying with the terms of trading and conditions of sale of the supplier.
4. This agreement shall be a continuing guarantee to the supplier for the whole of the customer's debt to the supplier from time to time in respect of goods and/or services supplied to the customer.
5. Each person who signs this agreement shall be liable under it whether or not any other intended signatory has also signed the agreement.
6. The liability of the Guarantor(s) under this agreement shall not be affected by any time to pay or any other concession granted by the supplier to the customer or by any other failure on the part of the supplier to enforce its rights against the customer.

Dated the ..... day of ..... 20 .....

Guarantor 1 ..... Guarantor 1 .....

Print Name: ..... Print Name: .....

Address ..... Address .....