

Customer credit application for trade account

Business contact information

Contact name:

Phone:	Fax:	E-mail:
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Address:

City:	State:	Postcode:
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In business since:

Sole trader: <input type="checkbox"/>	Partnership: <input type="checkbox"/>	Limited liability: <input type="checkbox"/>	Other: <input type="checkbox"/>
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Business and credit information

Postal address:

City:	State:	Postcode:
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Telephone:	Fax:	E-mail:
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Bank name:

Bank address:	Phone:
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City:	State:	Postcode:
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Business/trade references

Company name:	Company name:
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Contact name:	Contact name:
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Address:	Address:
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City:	Postcode:	City:	Postcode:
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Phone:	Phone:
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Fax:	Fax:
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E-mail:	E-mail:
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Company name:	Company name:
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Contact name:	Contact name:
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Address:	Address:
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City:	Postcode:	City:	Postcode:
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Phone:	Phone:
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Fax:	Fax:
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E-mail:	E-mail:
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Agreement

- 1. All invoices are to be paid on the 15th of the month following the date of the invoice.
- 2. Any claims arising from invoices must be made within three working days of receipt of invoice.
- 3. By submitting this application, you authorize Kuthala Transport to make inquiries into the banking and business/trade references that you have supplied.

Signatures

Title:

Date:

Title:

Date: