



Trading Account application

| Business Name: | | | |
|---|---------------------------------------|---|---------------------------------|
| Accounts Contact name: | | | |
| Phone: | Mob: | E-mail: | |
| Trading Address: | | | |
| City: | State: | Postcode: | |
| In business since: | | | |
| Sole trader: <input type="checkbox"/> | Partnership: <input type="checkbox"/> | Limited liability: <input type="checkbox"/> | Other: <input type="checkbox"/> |
| Business Postal address: | | | |
| Street Address: | | | |
| City: | State: | Postcode: | |
| Telephone: | Fax: | E-mail: | |
| ABN: | | | |
| | | Phone: | |
| Business/trade references | | | |
| Company name: | | Company name: | |
| Contact name: | | Contact name: | |
| Address: | | Address: | |
| City: | Postcode: | City: | Postcode: |
| Phone: | | Phone: | |
| Fax: | | Fax: | |
| E-mail: | | E-mail: | |
| Company name: | | Company name: | |
| Contact name: | | Contact name: | |
| Address: | | Address: | |
| City: | Postcode: | City: | Postcode: |
| Phone: | | Phone: | |
| Fax: | | Fax: | |
| E-mail: | | E-mail: | |
| Trading Terms | | | |
| <p>1. All invoices are to be paid on the 20th of the month following the date of the invoice.</p> <p>2. Any claims arising from invoices must be made within seven working days of receipt of invoice.</p> <p>3. By submitting this application, you authorise 6012 Pty Ltd, trading as Crackpots Marine & Rural Supplies to make inquiries into the banking and business/trade references that you have supplied.</p> | | | |
| Signatures | | | |
| Name: | | Name: | |
| Title: | | Title: | |
| Date: | | Date: | |