

CREDIT APPLICATION FORM

Date: / /

Company Trading Name: _____

Company Legal Name: _____

Company Number: _____

Company Contact: _____ Position: _____

Phone: _____ Mobile: _____

Email: _____

Company Structure:

Limited Company ☐

Partnership ☐

Sole Trader ☐

Trust ☐

Postal Address: _____

_____ Post Code _____

Delivery Address: _____

_____ Post Code _____

Email address for **Tax Invoices**: _____

Email address for **Statements**: _____

Details of One Company Director

Directors Full Name: _____

Directors Home Address: _____

Credit References Please:

1. _____ Ph or email: _____

2. _____ Ph or email: _____

3. _____ Ph or email: _____

How Did You Find Us: _____

I Certify that the above information is true and correct and that I am authorised by the applicant to make this credit application. And In accordance with the privacy Act (2020) I authorise any personal or company information to be given to TMK Packers Ltd or their representative regarding this credit application

Authorised Applicant Signature: _____ **Date:** _____

Position: _____

Terms: All Invoices are due 20th of the following month after purchase unless agreed otherwise. Any collection costs and/or legal fees will be incurred by the debtor.

Payment Details:

WESTPAC 03-0732-0305803-000

Please quote your Customer Account No. As a reference

We hope you will be impressed with our service. We are always pleased to help. If you have any queries, please contact us. If you have any problems at any time, please contact me personally.