

CREDIT ACCOUNT APPLICATION FORM

Type of Account Required

Please tick one of the following options	
COD (Cash On Delivery) <input type="checkbox"/>	Credit Account <input type="checkbox"/>

Company Information

Full Trading Name:		
Registered Company Name:		
ABN:	ACN:	
Postal Address:		
Suburb:	State:	Postcode:
Delivery Address:		
Suburb:	State:	Postcode:
Delivery information eg Loading dock/ access door etc:		
Best contact phone number for delivery:		
Contact for deliveries:		
Accounts Contact Details		Purchasing Contact Details
Contact Name:	Contact Name:	
Email Address:	Email Address:	
Telephone No:	Telephone No:	
Fax No:	Fax No:	

Company Structure

Directors / Partners / Sole Traders / Trustees (Circle Applicable)	
1. Name:	2. Name:
Address:	Address:
Contact No:	Contact No:
Driver's License No:	Driver's License No:
3. Name:	4. Name:
Address:	Address:
Contact No:	Contact No:
Driver's License No:	Driver's License No:

CREDIT ACCOUNT APPLICATION FORM (Cont.)

Trade References

<i>You must provide 3 trade references</i>		
Company Name	Email	Phone
1.		
2.		
3.		

Bank Details

Branch	BSB	Account No

Business Details

Year Established	Type of Business	Estimated Monthly Expenditure

Trading Terms

Read and agree to trading terms (ISO Form 7.2/3) by initialing each page, signing, and dating the last page.

Email the completed form to accounts@nowchem.com.au

Office Use Only

Account:	Approved / Not Approved
Credit Limit:	\$
Referred By:	
Sales Territory:	
Sales Rep	
Price Level:	List <input type="checkbox"/> 10+ <input type="checkbox"/> 16+ <input type="checkbox"/> 32+ <input type="checkbox"/> Distributor <input type="checkbox"/>
Class:	
Run:	
Ensure Trading Terms Signed by both parties	Date:
Comments:	