

Credit Application for a Business Account - Business Contact Information

Contact Name:				Company Position:				
Company Name:					ABN:			
Phone:		Mobile:		Email:				
Company Address:								
City:				State:		Postcode:		
Date Business Commenced:				Credit Limit Requested:	\$			
BUSINESS AND CREDIT INFORMATION								
1) Principal/Partner/Officer/Director(s):				Drivers Licence:				
Private Address:								
City:				State:		Postcode:		
2) Principal/Partner/Officer/Director(s):				Drivers Licence:				
Private Address:								
City:				State:		Postcode:		
Accounts Contact:								
Phone:		Fax:		Email:				
BUSINESS AND TRADE REFERENCES								
Company Name:				Contact:				
Phone:				Email:				
Company Name:				Contact:				
Phone:				Email:				
AGREEMENT								
1)	All invoices to be paid on departure.				Yes <input type="checkbox"/>	No <input type="checkbox"/>		
2)	All invoices are to be paid 14 days from the date of the invoice. Personal Guarantee Required.				Yes <input type="checkbox"/>	No <input type="checkbox"/>		
3)	All overdue invoices bear interest at 5% per annum (or maximum allowed by law) on unpaid balance.							
4)	In the event of default of payment when due, all costs of collection, including legal fees and court costs, shall be paid by the applicant.							
5)	Any credit extended to the applicant may be reduced or eliminated in any event that Emerald Stay on Sullivan Pty Ltd, in its reasonable discretion, determines that the applicant's financial situation or ability to pay is impaired.							
6)	By submitting this application, you authorise Emerald Stay on Sullivan Pty Ltd to make inquiries into banking and or the trade references that you have supplied.							
7)	Persons signing this document will be personally responsible for any outstanding funds.							
SIGNATURES, GENERAL CUSTOMER APPLICATION								
Name:				Name:				
Signature:	_____			Signature:	_____			
On Behalf of Emerald Stay on Sullivan Pty Ltd				Signed by the Applicant / Client				
SIGNATURES, PERSONAL GUARANTEES								
Name (1):				Name (2):				
Signature:	_____			Signature:	_____			
INTERNAL USE ONLY								
All fields completed	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Applicant Signature	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Guarantor Signature	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Credit approved	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Credit Limit:	\$		Applicant Notified	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Completed by:			Signature:	_____			Date:	