DUGUID INDUSTRIAL SUPPLIES

ABN: 99 559 947 530 PH: (03)50321006 EMAIL: <u>accounts@duguids.com.au</u>

CREDIT APPLICATION FORM

CUSTOMERS FULL NAME			
A.B.N. Number			
POSTAL ADDRESS			
LOCATION ADDRESS			
COMPANY/BUSINESS NAME.			
PROPRIETORS NAMES			
AND			
ADDRESSES			
TELEPHONE No.	BUSINESSPRIVATE		
	MOBILE		
EMAIL			

PREFERRED INVOICE AND STATEMENT DELIVERY METHOD: POST / EMAIL

TYPE OF BUSINESS	
I YPE OF BUSINESS	

PERSONS JOINTLY & SEVERALLY LIABLE FOR THE DEBTS (List names of all Directors of the Company)

1	2	
3		
CREDIT REFERENCES		
1	PH. NO	EMAIL
	PH.NO	
	PH.NO	

I/We the undersigned. Having now completed this Credit Application form with Duguid Industrials Supplies, hereby swear that the information given is true and correct and I/We the undersigned understand that all Accounts held with this Company are on a STRICTLY 30 DAY BASIS AND SHOULD THE ACCOUNT EXCEED THESE TERMS MAY BE CLOSED and should any costs be incurred in the collection of the debt I understand that I/We are responsible for them. Under the Privacy Act 1988 as amended the need to be authorized to allow access to personal credit information in relation to a Commercial Credit Application.

- 1. I/We give authority to the Credit Referees listed on this page to give my/our credit history to Duguids.
- I/We agree that Duguids may seek consumer credit information under Section 18K (1) (b) of the Privacy Act 1988.

SIGNED...... DATED......

FOR OFFICE USE ONLY:

CREDIT REFERENCES CHECKED BY:	DATED
CUSTOMER TYPE:	