



Australian Scaffolds (Aust) Pty Ltd 71 Hobart Street, Riverstone NSW 2765

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A.B.N 66 124 410 359 A.C.N 124 410 359

APPLICATION FOR CREDIT ACCOUNT

(Credit amount to be determined when application received).

Type of Business:

Sole Trader:

Partnership:

Company:

Other:

Nature of Business:

Date commenced:

Trading Name:

Company Name:

Postal Address:

Business Address:

If Company, Registered Office Address:

A.C.N:

A.B.N:

Telephone (Business):

Telephone (Home):

Facsimile:

Mobile:

Accounts email:

Web:

Name and addresses of Sole Trader / Partners / Directors:

(Full names and residential addresses)

1

2

3

Banking Details:

Bank: _____ Branch: _____

Name of Account: _____

Business Reference:

Company Name: _____

Address: _____

Telephone Number: _____ Fax Number: _____

Company Name: _____

Address: _____

Telephone Number: _____ Fax Number: _____

Company Name: _____

Address: _____

Telephone Number: _____ Fax Number: _____

Have you ever been declared bankrupt?

Have you ever been a director of a company which has been wound up or liquidated?

YES / NO

If yes, please give details: _____

DECLARATION

I / we (personal name) 1 _____ 2 _____

Declare that all information supplied to us is true and correct in every detail. I / We acknowledge that if credit is granted to you this will be done in reliance upon the information supplied by me / us.

I / we authorise Australian Scaffold (Aust) Pty Ltd to make enquiries with regards to assessing this credit application including access of personal / consumer credit files that may be held by any credit reporting agency or provider of credit.

Signed: _____ Dated: _____

Name (please print) _____

Signed: _____ Dated: _____

Name (please print) _____

Office Use Only

<u>Reference checked</u>	<u>Date</u>	<u>By</u>	<u>Days Given</u>	<u>Approved</u>
1				
2				
3				

Date account opened: _____