

Inner Wisdom Promotions

Wilfitz Pty Ltd

ABN# 42 052 946 862

CREDIT APPLICATION

PO Box 105 Mackay Qld 4740

DATE:

Ph: 07 4957 7505

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EMAIL: sales@innerwisdom.com.au

54 Wellington Street Mackay 4740

www.innerwisdom.com.au

Company/Firm/Partnership _____ ACN# _____

Trading Name

Address: _____ Phone: _____

_____ Fax: _____

_____ Email: _____

Full Names & Addresses of ALL Proprietors/Partners or Directors

1. _____ Phone: _____

2. _____ Phone: _____

3. _____ Phone: _____

Name & Address of Banker _____

Name & Address of Three Businesses Currently giving you credit:

1. _____ Phone: _____

_____ Phone: _____

2. _____ Phone: _____

_____ Phone: _____

3. _____ Phone: _____

Credit Limit Requested: _____ ABN# _____

We hereby apply for credit facilities and agree to adhere to your trading terms which are stated on the back hereof and in consideration of your supplying such credit facilities, I/We the undersigned, proprietors/partners/directors of our firm/partnership/company, jointly and severally guarantee the payment of the above firm/partnership/company debts incurred with THE SELLER. Furthermore I/We have read and understood the Conditions of Sale and Trading Terms as listed on the back of this application.

Signed for and on behalf of firm/partnership/company and on own behalf as guarantor.

(I am authorized to sign)

Witness

Signature: _____ Signature: _____

Name(Printed) _____ Name(Printed) _____

Position Held _____ Address: _____

Signature: _____ Signature: _____

Name(Printed) _____ Name(Printed) _____

Position Held _____ Address: _____

Signature: _____ Signature: _____

Name(Printed) _____ Name(Printed) _____

Position Held _____ Address: _____

FOR OFFICE USE ONLY

Date Approved: _____ Credit Limits: _____ Comments: _____

References: 1 _____ 2 _____

3 _____ Extra _____