

30 DAY EOM CREDIT ACCOUNT APPLICATION

(Credit is not available until this application is approved)

Customer's Details: 2 Individual 2 Sol	e Trader 🛛 Trust 🖓	Partnership	Company Cother:				
Full or Legal Name:							
Trading Name (if different from above):							
Physical Address:			State:	Postcode:			
Billing Address:			State:	Postcode:			
Email Address:							
Phone No:	Mobile No:						
Personal Details: (please complete if you are an Individual)							
D.O.B. Driver's Licence			No:				
Business Details: (please complete if you are a Sole Trader, Trust, Partnership, Company or Other – as specified)							
ABN: ACN:			Date Established (current owners):				
Nature of Business:			QBCC No:				
Estimated Monthly Purchases: \$			Credit Limit Required: \$				
Principal Place of Business is: 2 Rented 2 Owned 2 Mortgaged (to whom):							
Directors / Owners / Trustee (if more than two, please attach a separate sheet)							
(1) Full Name:			D.O.B.				
Private Address:			State:	Postcode:			
Driver's Licence No: Phone No:			Mobile No:				
(2) Full Name:	D.O.B.						
Private Address:			State:	Postcode:			
Driver's Licence No:	Driver's Licence No: Phone No:		Mobile No:				
Account Terms: 2 30 Days after the end of the Invoice Month							
Purchase Order to be quoted on invoices? 2 NO 2 YES [Per Project Each Job]							
Accounts Email Address: Phone No:							
Accounts Contact:			Bank BSB No:				
Bank and Branch:			Bank Account No:				
Trade References: (please provide companies that are willing to provide trade references)							
Name Email Address		dress	Phone				
1.							
2.							
3.							

I certify that the above information is true and correct and that I am authorised to make this application for credit. I have read and understand the terms and conditions of trade of McClelland Concrete Pumping which form part of and are intended to be read in conjunction with this Credit Account Application and agree to be bound by these conditions. I authorise the use of my personal information as detailed in the Privacy Act clause therein. *I agree that if I am a director/shareholder (owning at least 15% of the shares) of the Customer, I shall be personally liable for the performance of the Customer's obligations under this contract.*

SIGNED (CUSTOMER):		SIGNED (MCP):	SIGNED (MCP):				
Name:		Name:	Name:				
Position:		Position:	Position:				
WITNESS TO CUSTOMER'S SIGNATURE:							
Signed:		Name:	Date:				
OFFICE USE ONLY							
Account / Ref. No.	CREDIT LIMIT	APPROVED BY	DATA INPUTTED	DATE			
	\$			/ /			

