



www.superstubbie.com.au

Customer Credit Application Form

Please fill the information and send this to: sales@superstubbie.com.au

Ph: +61436000189

Business contact information

Contact name:

Phone:

Fax:

E-mail:

Address:

City:

State:

Postcode:

In business since:

Sole trader:

Partnership:

Limited liability:

Other:

Business and credit information

Postal address:

City:

State:

Postcode:

Telephone:

Fax:

E-mail:

Bank name:

Account Number:

Bank address:

Phone:

City:

State:

Postcode:

Business/trade references

Company name:

Company name:

Contact name:

Contact name:

Address:

Address:

City:

Postcode:

City:

Postcode:

Phone:

Phone:

Fax:

Fax:

E-mail:

E-mail:

Company name:

Company name:

Contact name:

Contact name:

Address:

Address:

City:

Postcode:

City:

Postcode:

Phone:

Phone:

Fax:

Fax:

E-mail:

E-mail:

Agreement

1. All invoices are to be paid within 30 days EOM following the month of the invoices.
2. Any claims arising from invoices must be made within seven working days of receipt of invoice.
3. By submitting this application, you authorise Super Stubbie Pty Ltd to make inquiries into the banking and business/trade references that you have supplied.
4. You represent you are an authorized representative with authority to enter into this agreement and the information contained in this Application and any attachment is true, correct and complete. If credit is extended, you agree to be bound by all of the terms and conditions on Super Stubbie Pty Ltd's invoices and posted on Super Stubbie Pty Ltd's website.

Signatures

Guarantor Signature:

Name and Title:

Date:

Guarantor Signature:

Name and Title:

Date: