

# CREDIT APPLICATION FORM



A division of  
**Amari**  
PLASTICS

Company Name: \_\_\_\_\_  
Trading Name: \_\_\_\_\_  
Postal Address: \_\_\_\_\_  
Suburb: \_\_\_\_\_ State: \_\_\_\_\_ P/Code: \_\_\_\_\_  
Delivery Address: \_\_\_\_\_  
Suburb: \_\_\_\_\_ State: \_\_\_\_\_ P/Code: \_\_\_\_\_  
Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_  
Accounts Contact: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Accounts Email: \_\_\_\_\_ INV Email: \_\_\_\_\_  
Purchasing Contact: \_\_\_\_\_ Phone:(\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_  
Credit Amount Requested \$ \_\_\_\_\_

## BUSINESS PROFILE

Type of Business: \_\_\_\_\_ How long has this company been in business: \_\_\_\_\_  
Legal Status: (Pls Tick Relevant Boxes)  Private Company  Public Company  Sole Trader  
 Partnership  Government  Trust  Other

### TRUST APPLICANTS PLEASE COMPLETE

Does the Applicant trade as a Trading Trust?  Yes  No Type of Trust:  Discretionary  Unit  
(If Yes, please provide copy of the Trust Deed)

Name of Trust: \_\_\_\_\_ A.B.N of Trust: \_\_\_\_\_  
Name the Trustee of the Trust: \_\_\_\_\_

## IF A COMPANY

Registered Name: \_\_\_\_\_  
ABN Number: \_\_\_\_\_ ACN Number: \_\_\_\_\_  
Registered Address: \_\_\_\_\_  
Bank: \_\_\_\_\_ Branch: \_\_\_\_\_ State: \_\_\_\_\_

## FULL NAMES AND ADDRESSES OF TWO DIRECTORS/PARTNERS/PROPRIETORS

1. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
2. Name: \_\_\_\_\_  
Address: \_\_\_\_\_

If required are you prepared to sign a personal guarantee:  Yes  No If YES please fill out Individual Personal Guarantee Form

## TRADE REFERENCE (PLEASE SUPPLY THREE OF YOUR MAJOR SUPPLIERS)\* Please provide Fax, Email and Telephone numbers\*

1. Contact Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_  
2. Contact Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_  
3. Contact Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

## OFFICE USE ONLY

Order Pending: \_\_\_\_\_ Sales Rep No: \_\_\_\_\_ Approved Credit Limit: \_\_\_\_\_  
Account Rep: \_\_\_\_\_ Customer Type: \_\_\_\_\_ Debtor Category: \_\_\_\_\_  
Debtors Ledger: \_\_\_\_\_ Territory: \_\_\_\_\_  
Authorised by: \_\_\_\_\_ Date Received: \_\_\_\_\_ Date Opened: \_\_\_\_\_

## Individual Personal Guarantee



Dated: \_\_\_\_\_

If the customer is a Company Sole trader/Partnership/Other, or if the business is owned by a company, the directors/ owners/partners/sole traders/other are required to complete the following:

We (print full names) \_\_\_\_\_

Of (residential address) \_\_\_\_\_

Being Directors/Sole trader/Partnership/Other of Business Name) \_\_\_\_\_

A.B.N. \_\_\_\_\_ A.C.N \_\_\_\_\_

Herby jointly and severally:

- (i) Guarantee the company/business payment of all debts to be paid, by the customer and agree that this guarantee will be a continuing guarantee and will not in any way be waived or affected by any time or indulgence granted by the company/business to the customer.
- (ii) Charge any property owned by us whether alone or jointly as a tenant in common or as a joint tenant in favour of the company/business to secure any moneys owing hereunder whether or not the company/business has taken or has threatened to take any action against the customer or against any guarantor in respect thereof.
- (iii) Acknowledge that they have been given the opportunity to seek legal advice before signing this guarantee.

Dated this \_\_\_\_\_ Day of \_\_\_\_\_

Signed \_\_\_\_\_ Print Name: \_\_\_\_\_

Signed \_\_\_\_\_ Print Name: \_\_\_\_\_

Witnessed Signature \_\_\_\_\_

Print Witness Name: \_\_\_\_\_ Date: \_\_\_\_\_

Delivery/Receipt – any signed document transmitted by facsimile machine (fax) /email shall be treated in all manner and respects, as an original document and the signature of any Party upon a document transmitted by fax/email shall be considered an original Signature.

## NOTICE OF DISCLOSURE OF YOUR CREDIT INFORMATION TO A CREDIT REPORTING AGENCY

Under section 18E (8) (c) of the Privacy Act, CHIEF MEDIA a division of Amari Plastics is allowed to give a Credit Reporting Agency personal information about your credit application. The information which may be given to an Agency is covered by Section 18E (1) of the Act and includes:

- \*Identity particulars (as permitted by the Privacy Act Commissioners determination issued under Section 18 (E) (3)).
- \*The fact that you have applied for credit and the amount.
- \*Payments which become overdue more than 60 days, and for which collection has commenced.
- \*Advice that payments are no longer overdue.
- \*Cheques drawn by you which have been dishonoured more than once
- \*In specified circumstances that, in the opinion of CHIEF MEDIA a division of Amari Plastics you have committed a serious credit infringement.

## GENERAL TERMS AND CONDITIONS OF CREDIT ACCOUNT

- 1/ I/We understand and acknowledge that normal trading terms are strictly 30 days from end of month.
- 2/ I/We undertake to pay all accounts on or before the due date and acknowledge that should payments become overdue. Credit may be suspended until the account is brought within trading terms
- 3/ I/We understand that credit may be withdrawn at any time.
- 4/ I/We understand that interest may be charged on overdue accounts.
- 5/ I/We agree to pay any reasonable expenses incurred in obtaining or attempting to obtain payment of any overdue amount.

CHIEF MEDIA a division of Amari Plastics reserves the right to refuse to accept for credit any goods which may be returned for credit more than seven days after the invoice for such goods.

CHIEF MEDIA a division of Amari Plastics reserves the right to vary the Terms and Conditions at any time by giving 30 days' written notice to the customer. I/We acknowledge receipt of and accept the General Terms and Condition of Sales.

## COMMERCIAL CREDIT AGREEMENT

Unless otherwise prevented by law, you consent to the use and storing of any personal information provided for the following purposes and any other purposes as shall be agreed between Us and You from time to time:

If CHIEF MEDIA a division of Amari Plastics considers it relevant to assessing my/our application for Commercial Credit, I/We agree to CHIEF MEDIA a division of Amari Plastics obtaining from a Credit Reporting Agency a Credit Report containing personal information about me/us in relation to Commercial Credit provided by AMARI PLASTICS.

If CHIEF MEDIA a division of Amari Plastics considers it relevant to collecting overdue payments in respect of Commercial Credit provided to me/us, I/We agree to CHIEF MEDIA a division of Amari Plastics receiving from a Credit Reporting Agency a Credit Report containing personal information about me/us in relation to collecting overdue payments.

I/We agree that CHIEF MEDIA a division of Amari Plastics may give to and seek from any other credit providers named in this application and any credit provider that may be named in a Credit Report issued by a Credit Reporting Agency information about my/our credit arrangements.

I/We understand that this information can include any information about my/our credit worthiness, credit standing, credit history or credit capacity that credit providers are allowed to give or receive from each other under the Privacy Act.

I/We understand that this information may be used for the following purposes:

- to assess an application by me/us for credit
- to notify other credit providers of a default by me/us
- to exchange information with other credit providers as to the status of this loan where I/We am/are in default with other credit providers.
- to assess my/our credit worthiness

## DECLARATION

I confirm that I am authorised to sign this application and thereby accept the conditions noted on behalf of the nominated entity or individuals. I/We certify that the information provided is true and correct to the best of my/our knowledge.

Date of Application: \_\_\_\_\_ Signature: \_\_\_\_\_ Print Full Name: \_\_\_\_\_