



# CREDIT APPLICATION

Account Name in full: \_\_\_\_\_

Trading Name (if applicable): \_\_\_\_\_

Street Address: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Town/City: \_\_\_\_\_ Post Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Customer Type :  Ltd Company  Sole Trader  
 Personal  Government  
 Other (please specify)

Nature of Business: \_\_\_\_\_ Age of Business: \_\_\_\_\_

Registered Office (if Company): \_\_\_\_\_

Bank / Branch: \_\_\_\_\_

Accountant: \_\_\_\_\_

Address: \_\_\_\_\_

Credit References (please include contact address, phone numbers & other relevant information)

1. \_\_\_\_\_ Phone: \_\_\_\_\_

2. \_\_\_\_\_ Phone: \_\_\_\_\_

3. \_\_\_\_\_ Phone: \_\_\_\_\_

*By signing below I give permission for these credit references to be checked by Longburn Shingle Co Accounts Receivable Department*

Name of Director: \_\_\_\_\_ Signature: \_\_\_\_\_

I/we confirm that prior to making this application for credit that I/we have been supplied with a copy of Longburn Shingle Company Limited's (**Company**) standard Terms of Trade which the Company may update from time to time (**Terms**) and agree to be bound by the Terms. I/we acknowledge and agree that by making this application I/we are granting the Company authority to register a security interest over me/us as the secured party on the Personal Property Securities Register in accordance with the Terms. Where the applicant is a company I/we acknowledge and agree that the Company may require personal guarantees from each of the directors in accordance with the Terms.

Dated:

Signature of Applicant: