

CREDIT APPLICATION FORM



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Safco Ltd

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CREDIT APPLICATION FORM

Name: ABN No:

Trading Name:

Purchasing Officer:

Postal Address:

Delivery Address:

Phone: Fax: Email:

Bank:

Contact: Phone:

Accountant:

Contact: Phone:

1 Trade Reference:

Contact: Fax:

2 Trade Reference:

Contact: Fax:

3 Trade Reference:

Contact: Fax:

Anticipated Monthly Purchases:

TERMS AND CONDITIONS ACCEPTED

Please see the Terms & Conditions of Sale on the next page

.....
Authorised Signature

.....
Position

.....
Date

.....
Printed Name

PH: 0800 723 265