



OFFICE USE ONLY

DATE REC:.....
CREDIT LIMIT: \$.....
APPROVED BY:.....
ARB CHECK:.....APP: Y / N
REPNOTIFIED Y / N
CUST. NOTIFIED BY LETTER Y / N

CREDIT APPLICATION

I/We understand that the trading terms offered by New Touch Fabrications Pty Ltd are NETT THIRTY (30) DAYS and will undertake to pay all accounts on the due date. I/We understand that in the case of an overdue account credit may be put on hold until the account is brought up to date.

BUSINESS NAME:

ABN:..... ACN:.....

ADDRESS:

.....POSTCODE:

POSTAL ADDRESS:

.....POSTCODE:

PHONE NUMBER:..... FAX NO:

EMAIL:.....ACCTSPAYABLECONTACT.....

HOW LONG AT THIS ADDRESS:

PREVIOUS ADDRESS IF LESS THAN 12 MONTHS:

TYPE OF BUSINESS:..... YEAR ESTABLISHED:

CREDIT LIMIT REQUESTED PER MONTH:

NAME AND ADDRESS OF DIRECTORS / PARTNERS OR PROPRIETORS:

- 1.....
- 2.....
- 3.....
- 4.....

TRADE REFERENCES (Relevant to credit request where possible, minimum 3 required please):

CHECKED BY:

- 1.....PH:.....FAX:.....|.....
- 2.....PH:.....FAX:.....|.....
- 3.....PH:.....FAX:.....|.....
- 4.....PH:.....FAX:.....|.....

I,certify that I am authorised to sign this form on behalf of the above. The information supplied is true and grant permission for New Touch Fabrications P/L to check my trading history and verify that the above information is correct. I have read the Terms and Conditions and agree to be bound by the Terms and Conditions referred to on the attached page (also available on www.newtouchfab.com.au).

Signature:.....Position:..... Date:.....

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“The Professionals in Fabrication”