



# KIWI INSULATION

freephone 0508 INSULATE

## Credit Application - To be completed by applicants - Please complete all sections and read the Terms and Conditions of Trade overleaf.

Date: \_\_\_\_\_ Ref No. \_\_\_\_\_

TRADE NAME: \_\_\_\_\_

Full Legal Name: \_\_\_\_\_

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

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

Billing Address: \_\_\_\_\_ Physical Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_ Postcode: \_\_\_\_\_

### BUSINESS DETAILS

Company Number: \_\_\_\_\_ Date Established: \_\_\_\_\_

Contact: \_\_\_\_\_ Position: \_\_\_\_\_

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

### DETAILS OF OWNERS/ PARTNERS/ DIRECTORS

Name: \_\_\_\_\_ Name: \_\_\_\_\_

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

\_\_\_\_\_ Postcode: \_\_\_\_\_ Postcode: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

### TRADE REFERENCES

Business Name 1: \_\_\_\_\_ Business Name 2: \_\_\_\_\_

Address or A/C No: \_\_\_\_\_ Address or A/C No: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

I certify that the above information is true and correct and that I am authorised to make this application for credit. I have read and understand the TERMS AND CONDITIONS OF TRADE (overleaf) of Laser Ceilings Limited T/A Kiwi Insulation Nelson which form part of, and are intended to be read in conjunction with this Credit Application and agree to be bound by these conditions. I authorise the use of my personal information as detailed in the Privacy Act clause therein. ***I agree that if I am a director or a shareholder (owning at least 20% of the shares) I shall be personally liable for the performance of the Buyer's obligations under this contract.***

SIGNED: \_\_\_\_\_ SIGNED: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

ID: \_\_\_\_\_ ID: \_\_\_\_\_

DOB: \_\_\_\_\_ Date: \_\_\_\_\_ DOB: \_\_\_\_\_ Date: \_\_\_\_\_