

CREDIT APPLICATION FORM

SAMPLE

This Credit Application Form Sample is designed as a guide for use by members of the Employers' Chamber. It is part of a suite of resources to help businesses put in place effective practices and procedures for their organisations.

Please be aware that no generic document can cover all circumstances and that you may need to adapt this to the needs of your business.

If you need further assistance with putting this resource into effect, or with other employment or business issues, please call the Employers' Chamber Advisers on (03) 366 5096

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APPLICATION FOR CREDIT ACCOUNT

APPLICANT DETAILS: *Please ensure all sections are completed and checked, before returning to XXX Ltd*

Trading Name of Organisation

Type of Business (please tick one box and describe main activity)

Company Sole trader Partnership Trust Other

Nature of Business

Full Legal Name of Organisation

 ("the Customer")

How long has the organisation been trading?

Date of Incorporation (if relevant)

Incorporation No. (if relevant)

Delivery Address (for Courier purposes)

Postal Address

Address of registered office (if company or society etc) if different from physical address

Contact Person

Contact details

Daytime Telephone:

Email Address:

Mobile:

Fax:

If Partnership/Trust/Other unincorporated body also complete the following

Number of Partners

Full names of first and second partner/trustee/member etc

(if more than 2 partners/trustees/members etc please provide additional information on separate sheet)

1.

2.

DOB:

DOB:

Residential Addresses

1.

2.

This property is

Rented Owned by you

Rented Owned by you

Solicitor

Accountant

Bank

Branch

Trade References

1.

2.

3.



DECLARATION

By signing and returning this Application, I/we (the Customer):

1. Understands that XXX Ltd (“the Supplier”) reserves the right to decline this Application.
2. Confirm that the information supplied by me/us in this Application is correct and complete and I/we agree to immediately advise the Supplier of any material change of any of the information contained in this Application.
3. Have read and understood the Supplier’s standard terms and conditions of trade (“Terms of Trade”) included with this Application and agree to be bound by the Terms of Trade (including any variations or replacement) and this Application.
4. Agree that all orders for goods (being the goods described on the invoices) placed with the Supplier are supplied on these terms and on the Terms of Trade.
5. Authorise any person or company to provide the Supplier with such credit information as the Supplier may require about me/us.
6. Authorise the Supplier to collect personal information about me/us from the trade referees named in this Application and from the credit reference agencies used by the Supplier. I/We acknowledge that such information is collected for any purpose connected with my/our business, for considering this Application and for all purposes in connection with the Supplier marketing of products and services in New Zealand. I/We consent to the Supplier disclosing any such information to credit reference and debt collection agencies as part of information exchanges with them. I/We acknowledge that my/our rights at law in relation to obtaining and correcting all information about me/us held by the Supplier are not affected.
7. Acknowledge that where more than one applicant applies for credit under this Application, each applicant will be jointly and severally liable.

If you have signed this application as a Director, Partner, Trustee or in any other capacity, you agree that the Supplier may collect personal information about you (in your personal capacity) from the credit reference agencies used by the Supplier. You acknowledge that such information is collected for the purpose connected with the Applicant’s business and for considering this Application. You may access and correct any personal information held by the Supplier about you.

Signed by the Applicant:

Name(s)	Signature(s)
1.	1.
2.	2.
Position/Title (e.g. Director, Partner, Trustee)	Date
1.	
2.	

Note:

1. If more than one Applicant **all** Applicants must sign; or
2. If the Applicant is a partnership or a trust **all** partners and non-professional trustees must sign.

GUARANTEE

In consideration of XXX Ltd (“the Supplier”) approving this Application by the Applicant (“the Customer”), I (the guarantor, whose name is listed below) jointly and severally unconditionally guarantee payment by the Customer of all monies due and owing by the Customer to the Supplier, in respect of all credit extended by the Supplier as a consequence of this Application including all monies due and owing by the Customer to the Supplier under the terms of the Supplier’s Terms of Trade. I acknowledge that I have read and understood the contents of the Supplier’s Terms of Trade.

I accept that as between the Supplier and myself I am liable as a principal debtor in respect of such monies. I accept that my guarantee is unaffected by the unenforceability of any payment of such monies, by the liquidation or bankruptcy of the Customer, by the giving of time or any indulgence to the Customer by the Supplier or any other matter. I accept that the Supplier may make demand for payment on me without demand being made of the Customer.

<p>Full Name of Guarantor:</p> <input type="text"/> <p>Full Occupation of Guarantor:</p> <input type="text"/> <p>Address of Guarantor (not PO Box):</p> <input type="text"/> <p>Signature of Guarantor:</p> <input type="text"/> <p>Date:</p> <input type="text"/>	<p>Witness Signature:</p> <input type="text"/> <p>Witness Name (please print)</p> <input type="text"/> <p>Occupation of Witness:</p> <input type="text"/> <p>Address of Witness (not PO Box):</p> <input type="text"/> <p>Date:</p> <input type="text"/>
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Office Use:

Account Number: _____	Terms: _____	Credit Limit: _____
Customer Type: _____	Entered by: _____	Date: _____

