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CREDIT APPLICATION

Company Name:				
Address:				
City:			Post Code:	
Tel:	Fax:			
Business Type: ☐ O.E.M	l ☐ Hydr. Shop ☐	Distributor	☐ Other (s	pecify) ———
Principal name:	Number of Employee:			
Established Since:	Annual Sale:			
Sale Tax Status:	Account Payable Contact:			
Purchasing Contact:				
	Bank Referen	ces		
Bank:		Accoun	t Number:	
Full Address:				
Tel:	F	ax:		
Contact:				
	Trade Referen			
1. Name:		Tel: _		Fax:
2. Name:		Tel: _		Fax:
3. Name:		Tel: _		Fax:
Applicant:		Title_		_
Signature:		Date:		

N.B. Our Credit Terms are Net 30 Days. Seventeen percent (17%) interest per annum shall be charged on all overdue account