

Kimbriki Environmental Enterprises Pty Ltd

ABN 65 136 789 261

Kimbriki Road, Ingleside NSW 2101

All correspondence to:

PO Box 196, Terrey Hills NSW 2084

Ph: (02) 9486 3512

Email: finance@kimbriki.com



30 Day Account Application

The customer named below applies for a credit facility with Kimbriki Environmental Enterprises Pty Ltd (KEE) and authorises KEE to allow a commercial credit reporting agency to assess this application and to provide any personal information provided in this application to such agency for that purpose. This facility will be available for use once the appropriate credit references have been completed and the required bond paid in accordance with the conditions of this account facility. The customer will be advised when the facility is available for use.

Individual Customer's full name:

Name of Business:

ABN:

Business Address:

Suburb:

State:

Postcode:

Postal Address:

Suburb:

State:

Postcode:

Email:

Website:

Registered Address:

Maximum monthly credit amount required:

\$

Nature of Business or Occupation:

Accounts Payable Contact:

Phone No:

Mobile No:

Fax No:

Accounts Payable Contact email:

Legal Entity:

- Sole Trader/Partnership
- Pty/Ltd Company
- Trust/Nominee Company

Trading Premises:

- Owned
- Leased
- Rented
- Buying

Date Business originally commenced:

Date Business commenced under current ownership:

Bank:

Bank Address:

Names, Titles and Private Addresses of Principals or Proprietors and Directors (please attach additional page if required)

Surname:			
Given Names:			
Position or Title:			
Shares Held:			
Home Telephone No:			
Private Address:			
Date of Birth:			
Driver's License Number:			

This section to be completed by Companies (Ltd & Pty Ltd)

Date of Incorporation:	Number of Shareholders:	Paid-up Capital:	\$
Approx. Value of Assets: \$	Are the Assets mortgaged? (wholly/partly/unencumbered)		

This section to be completed by Firms and Partnerships (If not registered, proceed as for 'PRIVATE INDIVIDUALS')

Total number of partners	Registration No:	Date of Registration
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This section to be completed by private individuals

Employer's Name: _____

Address: _____

Suburb:	State:	Postcode:
Period of employment	Length of time in present home	Is home owned or rented?

If rented, name and address of landlord or agent _____

Drivers Licence No: _____

PLEASE LIST ALL PERMANENT VEHICLE REGISTRATION NUMBERS AUTHORISED TO USE ACCOUNT

BUSINESS REFERENCES (firms providing goods or services to you on credit)

Full Name	Suburb	Telephone #	Email

CONDITIONS OF CREDIT IF APPLICATION APPROVED

In consideration of the credit facility being granted to the customer by KEE, the customer agrees:

- To pay for all services provided to its business by KEE together with applicable GST within 30 days of the end of the month in which the invoice is dated.
- To provide details to KEE immediately of any changes of the names, addresses, contact numbers and authorised vehicles specified in this application.
- To pay interest to KEE at the rate of 10% per annum on daily balances of all overdue amounts. Interest shall be paid from the due date up to and including the date of actual payment together with an administration fee of \$55 incl. GST.
- To provide a cash security bond in an amount determined by KEE (but being not less than \$2,000). This bond must be paid to KEE before the credit facility may be used.
BSB : 062208 ACCOUNT NO.: 10162620
- That the person(s) (if more than one, jointly and severally) signing this application is/are personally liable for all money owing by the Customer if the Customer fails to pay KEE within 30 day trading terms.
- That GST will be payable by the Customer in respect of any fee for services provided by KEE.
- That for the purposes of the Privacy Act 1988 (C'wealth) any information provided in this application may be disclosed to any person for the purposes of assessing this application and recovering any money which may be payable to KEE by either the Customer or any signatory to this application.
- That the signatory(ies) below is/are authorised by the Customer to make this application on its behalf and to enter into the agreements in this section of the application.

Date of application: _____

Signatory(ies):

Name	Position	Signature

OFFICE USE ONLY

- | | |
|--|--|
| <input type="checkbox"/> MASTER ACCOUNT LIST | <input type="checkbox"/> W/M CUSTOMER |
| <input type="checkbox"/> W/M VEHICLE | <input type="checkbox"/> W/M 2G ACCOUNTS |
| <input type="checkbox"/> VEHICLE FAX OUT | <input type="checkbox"/> NOTIFIED CUSTOMER |
| <input type="checkbox"/> BOND RECEIVED | <input type="checkbox"/> NCI |

Approved by: _____ Name and title: