

Startronics (NZ) Limited CRN 1550836
35-39 Bridge Street, PO Box 30 240, Lower Hutt, New Zealand
Phone: +64 4 566 3427 Fax: 64 4 566 3450

APPLICATION FOR CREDIT

Trading Name: _____		
Company Name: _____		
(Please Tick) <input type="checkbox"/> Public Company <input type="checkbox"/> Private Company <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Trader <input type="checkbox"/> Trust		
Date Established: _____	Company #: _____	GST #: _____
Parent Company: _____		
Postal Address: _____		
Business Address: _____		
(Not P.O. Box)		
Phone: _____	Fax: _____	
Type of Business: _____	Premises: <input type="checkbox"/> Owned <input type="checkbox"/> Leased	
Amount of Credit Required: _____		
(State Currency)		

Management Details (Full Names of Directors/Partners/Sole Traders etc):	
1. _____	2. _____
3. _____	4. _____
Name of Bank: _____	Branch: _____

TRADE REFERENCES: Referees to be comparable to amount of credit required.		
1. Name: _____	Phone: _____	Fax: _____
2. Name: _____	Phone: _____	Fax: _____
3. Name: _____	Phone: _____	Fax: _____
4. Name: _____	Phone: _____	Fax: _____
5. Name: _____	Phone: _____	Fax: _____

FINANCIAL DETAILS: Startronics uses Lincoln Indicators risk analyses to help assess credit risk. Please complete the attached "Lincoln Indicators Financial Analysis Data Sheet" to assist.

OTHER

1. I/We hereby apply for the opening of a credit account and certify that the information supplied in support thereof is true and correct in every material respect.
2. I/We understand that the normal trading terms are strictly 30 days and payment is due by the end of the month following delivery. I/We undertake to pay all accounts in accordance with Startronics' Standard Terms and Conditions unless otherwise agreed by Startronics in writing and acknowledge that if the account becomes overdue, it will be automatically suspended until brought within trading terms.
3. I/We understand that the level of credit granted is at Startronics' absolute discretion and will consider the quality of information provided in this application and supporting data, including any financial information provided.
4. I/We understand that interest may be charged on overdue balances in accordance with Startronics' Standard Terms and Conditions.
5. I/We understand that Directors' Personal Guarantees may be required and certify that these will be provided upon request.
6. I/We authorise Startronics to investigate all trade references regarding my/our credit and financial history and to carry out any further investigation, including obtaining information from a credit reporting agency or disclosing credit information to a credit reporting agency about our application for credit, now and from time to time as it considers appropriate.
7. I/We acknowledge receipt of and accept Startronics' Standard Terms and Conditions and certify that I am authorised to sign this Application for Credit.

Signature: _____ Position: _____
(CEO / CFO / DIRECTOR / PROPRIETOR)

Name _____ Date: _____
(Print in Block Letters):

Office Use Only:

1. _____
2. _____
3. _____
4. _____
5. _____