

& RIGGING

APPLICATION FOR CREDIT ACCOUNT

Registered Business Name	:			
Trading Name:				
ABN Number:		_ACN Number:		
Business Address:				
Postal Address:				
Telephone :()	Facsimile: ()Mobile:		
Email:				
	COMPANIES DIRECT	ORS/PROPRIETORS		
1. Name & Address:				
State:	Postcode:	Phone:		
2. Name & Address:				
State:	Postcode:	_Phone:		
3. Name & Address:				
State:	Postcode:	Phone:		
	TRADE REFERENCES	S (Major Suppliers)		
1. Name & Address:				
State:	Postcode:	Phone:		
2. Name & Address:				
State:	Postcode:	Phone:		
-	made upon your company's acceptanderstood. These being STRICTLY THIR	ce of this application in accordance with the Terms & Conditions TY DAYS (30) from statement Date.		
Signature of Applicant or Authorised Representative		Witness to Signature		
Print Name of Applicant o	r Authorised Representative	Print Name of Signature		



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COMPANY DIRECTORS GUARANTEE

I/We the undersigned being	the Proprietor(s) or Directors of		request
Coffs City Cranes & Rigging	o enter into hire agreements to supp	oly goods, materials and work from t	ime to time
with the Company and in co	nsideration of CCC & Rigging so doing	g I/We hereby jointly and severally g	uarantee to
CCC & Rigging the due paym	ent by the company of all obligations	s under any such hire agreement, Sa	le of goods,
work done and material pro	vided and in the event default by the	Company I/We shall be deemed to	become
principals debtor(s) to CCC 8	$oldsymbol{k}$ Rigging and agree that this guarant	ee shall not be in any way affected b	y CCC &
Rigging granting time or any	other indulgence to the Company ar	nd that the guarantee shall bind my/	our persona
representative (. I/We agree	to be bound by the Terms and Cond	itions of CCC & Rigging printed on th	ne attached
document. I/We give CCC &	Rigging authority to seek credit infor	mation about the above mentioned	Business:
Company Account details:			
Coffs City Cranes and Riggir	g		
Bank: National Australia Ba	nk		
BSB: 082 551 Account Num	per: 59410 8579		
		-	
Signature:	Name:	Date:	
Signature:	Name:	Date:	

Signature:______Date: _____