

Part of the PTB Group

Credit Application for a Business Account

BUSINESS CONTACT INFORMATION		
Company name:	ABN/Registration No:	
Phone:	E-mail:	
Registered company address (No PO BOX):		
Date business commenced:		
BUSINESS AND CREDIT INFORMATION		
Accounts Payable Contact:	Accounts Payable Ph No:	
Accounts Payable Email:		
Purchasing Contact:	Purchasing Ph No:	
Purchasing Email:		
Credit Limit Requested: \$	Monthly Order Amount: \$	
BUSINESS/TRADE REFERENCES		
TRADE REFERENCE 1 Company name:		Contact Name:
Address:		
City/State:	Country:	Post Code:
Phone:	Accounts E-mail:	
TRADE REFERENCE 2 Company name:		Contact Name:
Address:		
City/State:	Country:	Post Code:
Phone:	Accounts E-mail:	
TRADE REFERENCE 3 Company name:		Contact Name:
Address:		
City/State:	Country:	Post Code:
Phone:	Accounts E-mail:	
AGREEMENT		
<ol style="list-style-type: none"> 1. By submitting this application, you authorize PTB GROUP LIMITED to make inquiries into the business/trade references that you have supplied. 2. The signed credit application needs to be returned to accountsreceivable@pacificturbine.com.au before any goods will be shipped 		
SIGNATURES		
Signature:	Title/Position:	
Name:	Date:	