PLEASE FAX BACK COMPLETED FORM DOLLYS BROLLYS

A Division of Plane Crazy Ltd

P O Box 3116, Greerton, Tauranga 3142, New Zealand

Telephone: 64 7 5432103 Fax: 64 7 5432103 or mob: 027-2378637 E-mail: sales@dollysbrollys.co.nz Website: www.dollysbrollys.co.nz

CONFIDENTIAL CREDIT ACCOUNT APPLICATION

COMPANY NAME:			
TRADING AS:			
TELEPHONE:		FAX:	
EMAIL:			(this field is mandatory)
POSTAL ADDRESS:			
SUBURB / CITY:			POST CODE:
DELIVERY ADDRESS:			(if different from postal address)
SUBURB / CITY:			
FOR PARTNERSHIP/SOLI	E TRADERS/PRIVAT	E INDIVIDUALS	
NAME; (IN FULL)		RESIDENTIAL ADDRESS (FULL):	
FOR LIMITED LIABILITY (
DIRECTORS NAME: (IN FULL)		RESIDENTIAL ADDRESS (FULL)	
-	ded with the present dire	ectors?Years	Months
ALL TO COMPLETE			
BANK		BRANCH	
SOLICITOR		ACCOUNTANT:	
TRADING REFERENCES	1		Ph
	2		Ph
	3		Ph
ACKNOWLEDGEMENT I/We hereby acknowledge and advise Dolly's Brollys of any ch		and conditions of trade recorded on the	he reverse of this form and also undertake to
	ment of all accounts for	goods purchased by the above partn of any money outstanding to Dolly's E	nership/company, together with any legal or Brollys.
AGREED TO ON THIS DATE:	//		
SIGNATURE		POSITION	
NAME (Please Print)		Web Version 6 Feb 2014	