

## IMPORTERS & DISTRIBUTERS OF RAW MATERIALS

## **CREDIT APPLICATION FORM**

1. APPLICANT							
Company Name							
Trading Name							
Physical Address							
Postal Address						_	
Telephone No.		Area Code:		Number:			
Fax No.		Area Code:		Number:			
Contact Person					Cell no:		
2. BUSINESS INFORM	ATI	ON					
Form of Company							
Company/CC registration numb	er						
VAT registration number							
Credit terms		30 DAYS FROM STATEMENT					
3. OWNERS/ SHAREHO	OT.F	FRS					
Name		LKS					
ID Number							
% Interest Share in business							
Will shareholders sign surety							
Note: If business has more that	n thr	ee shareholders	. please at	tach schedule o	f above informa	tion on each shareho	older.

4. DIRECTORS A	ND MAN	AGERS				
Managing Director						
ID Number						
Physical Address						
Financial Director						
ID Number						
Physical Address						
Operations Manager						
ID Number						
Physical Address						
5. BANKING DET	AILS	<u> </u>		T		
BANK		BRANCH		ACCOUNT NUMBER		
6. TRADE REFER	ENCES					
NAME ADDRESS		S TERM		CONTACT NO.	AVG MONTHLY PURCHASES	
				I		
7 ACCOUNTANT	. / TAV A	DVISER / AUDITOR				
7. ACCOUNTANT	/ IAA A	DVISER / AUDITOR				
Name:						
Address:						
Telephone:						
Fax:						

## 8. DECLARATION

We declare that we were neither prosecuted nor judged in the last five years and that we're, on the basis of our actual financial situation, capable of fulfilling the liabilities arising through this application for a facility.

We are aware that this data is vital to our request to arrange finance, declare the information provided is true and correct and authorise the necessary Credit Bureau checks and Bank reports required.

Should our account fall into arrears for any reason, we agree to having interest levied on our account at the current prime lending rates applicable at that time.

City:		
Date:		
Signature:		
Designation:		
NOTES:		