

Herkes Electrical Supplies PTY LTD

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(Incorporating Pro-Lighting & Audio)
ACN 000 130 110 / ABN 25 000 130 110
MEMBER OF GEMCELL AUSTRALIA

Unit 7/890 Bourke Street, Waterloo, NSW 2017 AUSTRALIA
Post Office Box 7213, Alexandria, NSW 2015 AUSTRALIA

Tel: (02) 9319 3133 (Elect W/Sale)
Tel: (02) 9319 2452 (Pro-lighting)

Fax: (02) 9699 1319 (Elect W/Sale)
Fax: (02) 9319 0204 (Pro-lighting)
Fax: (02) 9698 3264 (Accounts)

Web: www.herkes.com.au
Email: herkes@herkes.com.au

application for credit facilities

please complete in full (2 pages)

1- STATE WHETHER : Sole Trader/ Partnership / PTY LTD / Public Co / GOVT / Charity. (strike out those inapplicable)

2- (a) FULL REGISTERED NAME _____ A C N : _____

(b) TRADING AS: _____ A B N : _____

3- (a) POSTAL ADDRESS: _____

(b) DELIVERY ADDRESS: _____

(C) NEXT OF KIN NOT LIVING AT THE ABOVE ADDRESS: _____ TEL: () _____
ADDRESS: _____

4- TELEPHONE No: () _____ Fx No: () _____ Email _____

5- REGISTRATION DATE: ____ / ____ / ____ TYPE OF BUSINESS: _____

6- NAME OF PARENT OR HOLDING COMPANY (TRADING COMPANY) _____

ADDRESS OF SUCH COMPANY: _____

7- FULL NAME OF OWNERS / PARTNERS / DIRECTORS.

NAME IN FULL: _____ DATE OF BIRTH: ____ / ____ / ____
ADDRESS: _____ (AH) PHONE NUMBER: () _____

NAME IN FULL: _____ DATE OF BIRTH: ____ / ____ / ____
ADDRESS: _____ (AH) PHONE NUMBER: () _____

NAME IN FULL: _____ DATE OF BIRTH: ____ / ____ / ____
ADDRESS: _____ (AH) PHONE NUMBER: () _____

8- ESTIMATED MONTHLY CREDIT REQUIREMENTS: \$ _____

9- NAME OF PERSON TO CONTACT RE ACCOUNT PAYMENTS: _____

10- HOW DID YOU KNOW ABOUT HERKES ELECTRICAL SUPPLIES P/L: _____

11- TRADE REFERENCES (commercial only)

1) Name of Business. _____	Tel. () _____	Contact Name. _____
2) Name of Business. _____	Tel. () _____	Contact Name. _____
3) Name of Business. _____	Tel. () _____	Contact Name. _____
4) Name of Business. _____	Tel. () _____	Contact Name. _____

Cont'd overleaf

12- **AGREEMENT TO TERMS OF TRADE:**

- (a) Payments will be made within **thirty (30) days** from the month of purchase.
- (b) Applicant should notify HERKES ELECTRICAL SUPPLIES if payment is not made in thirty (30) days.
- (c) Title of goods purchased remains in the hands of HERKES ELECTRICAL SUPPLIES, until payment is made and cleared.
- (d) Claims will only be recognised if made within sixty (60) days from date of invoice.
- (e) Any **fees resulting from legal action** taken by HERKES ELECTRICAL SUPPLIES to recover outstanding debt is payable by the applicant
- (f) The responsibility of the applicant to notify HERKES ELECTRICAL SUPPLIES of any changes to the information given on this form.
- (g) **Interest/ account keeping fee** will be charged against any amount exceeding ninety (90) days.

NAME OF APPLICANT: _____ SIGNATURE: _____ DATE: / /200

TITLE: _____

NAME OF APPLICANT: _____ SIGNATURE: _____ DATE: / /200

TITLE: _____

13- **DIRECTORS' / PROPRIETORS' GUARANTEE.**

I / WE, _____
directors / propriotors of the applicant company, herby agree to pay any or all outstanding invoices in the event of default or non performance of the applicant in respect to credit facilities provided to the applicant company going into liquidation, or entering into a scheme of arrangement or having a judgement entered against it.

NAME OF DIRECTOR / PROPRIETOR _____
(GUARANTOR)

SIGNATURE OF GUARANTOR: _____

NAME OF DIRECTOR / PROPRIETOR _____
(GUARANTOR)

SIGNATURE OF GUARANTOR: _____

NAME OF DIRECTOR / PROPRIETOR _____
(GUARANTOR)

SIGNATURE OF GUARANTOR: _____

OFFICE USE ONLY:

CHECKED BY: _____

BANK REFERENCE: _____

REFERENCE 1: _____

REFERENCE 2: _____

REFERENCE 3: _____

CREDIT AGENCY REPORT: _____

ACCOUNT CODE: _____ CREDIT LIMIT: _____ CREDIT DAYS: _____

APPROVED BY: _____ DATE: _____

REVIEW DATE: _____ APPROVED BY: _____

COMMENTS: _____

(PLEASE POST THE ORIGINAL)