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Credit Account Application Form

Company details:

Legal Entity			
Trading Name		Phone No	
ABN		Fax No	
Accounts Contact		Email Address	
Postal / Invoice Address		Business Address	
Date Commenced Business			
Trading Bank & Branch			
Anticipated Monthly Credit Required			

Trade References:

Full name and contact details of three trade references:

Company Name Contact	Telephone No.	
Company Name Contact	Telephone No.	
Company Name Contact	Telephone No.	

Please note these references must be of similar credit value to that requested

DECLARATION: I/we hereby submit the above information for the sole purpose of opening a Credit Account with Permatech. Should the account be granted I/we agree to settle purchases within thirty (30) days from the end of the month in which goods were invoiced. I/ we agree to pay interest, at current bank overdraft rates, on any over due amount on the account, and agree to pay any debt collectors expenses incurred in attempting to recover or recovery of such over due amounts, such interest and expenses maybe recovered as a liquidation debt. I/we agree that risk in the goods supplied shall pass to the purchaser on delivery but remain the property of Permatech until payment for them has been received.

PLEASE DON'T FORGET TO SIGN THE APPLICATION

Print Name		For Permatech Use	Account Manager
Signed			Account Number
Position			IND CLASS
Date			Credit Limit