



Ditech Systems Pty Ltd ABN 48 104 443 352
Trading as Intuit Technologies

Ph: (03) 6223 2688 - Fax: (03) 6223 3182
Email: accounts@itechnologies.com.au

Credit Application Form

Trading & Account Details

Account Name / Trading Name and ABN: _____

Business Address: _____

Postal Address: _____

Delivery Address (if different to above): _____

Telephone: _____ Fax: _____ General Account Contact Email: _____

Nature of your business _____

Date your business commenced trading under the ABN above _____

Credit Limit sought \$ _____

Ownership Details

Please indicate type of Ownership Proprietors details:

Proprietorship Name: 1. _____ 2. _____

Company Address: _____

Other (please specify) _____

If Company or Incorporated body, please complete the following:

Registered Name: _____ A.C.N. _____

Registered Address: _____

Director Details (in case of company ownership)

Name: 1. _____ 2. _____

Residential Address: _____

Date of Birth: _____

Drivers Licence No : _____



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(continued)

Contact Details & Trade References

Contact name for account queries: _____ Phone: _____

Accounts Email (for invoices and statements): _____

Your preferred Payment Type EFT cheque other please indicate

Your preferred method of delivery for statements email fax mail

Bank: _____ Branch: _____

References:

Name: 1. _____ 2. _____ 3. _____

Phone: _____

Payment is due within 14 days after receipt of goods.

On behalf of my company/partners/myself I agree that interest of 1.0 % per month may be charged on this account if payment is not made within the payment terms above. I/We agree to pay to you any collection and legal costs incurred by you in the recovery of this account. Acceptance of payment by credit card will be at the suppliers discretion.

I/We acknowledge that certain items of information in this application and credit facility (if approved) may be disclosed to a credit reporting agency. I/we authorise you to obtain consumer and/or commercial information permitted by the Privacy Act from a credit reporting agency and to use such information in order to assess this application for credit. This authority remains in force for the duration of this credit contract if this application is approved.

I/We declare to the best of our knowledge that the information given by us for your assessment of our credit worthiness is complete and accurate for all information requested

I/We hereby authorise you to seek and obtain a credit worthiness check from the credit providers indicated in this application or named in my/our credit agency report.

Subject to the provisions of the Privacy Act, I/we acknowledge that certain information about my/our credit facility may be exchanged with other credit providers to assist with the management of my/our credit arrangements.

I agree that ownership of the goods will not pass to us until full payment of the account is made, but risk will pass on delivery.

Name: _____ Signature: _____

Date: ____ / ____ / ____

Guarantees – Please note it is essential that this section is signed otherwise your Application cannot be approved

In consideration of credit being extended to the purchaser, we, the directors/proprietors do personally guarantee the performance of the company and agree to pay personally any overdue amounts upon demand

Name: _____ Signature: _____

Name: _____ Signature: _____