|  |
| --- |
| CREDIT APPLICATION |
| FORM |
| This Credit Application Form Need to be duly filled and signed by Customers who are in requirement of Credit Assistance from our company (sub to approval) |



5/15/2020

Credit Application Form (print in Customer letterhead)

# BUSINESS CONTACT INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| Company Name |  | Date of Application |  |
| Type of Business |  | Sole proprietorship | APPLIED TO |
| Phone | Fax |  | Partnership | **CARGO XMAN PVT LTD** |
| E-mail |  | Private Limited |  |
| Registered company addressCity, State, PIN Code |  | Public Limited |  |

# BUSINESS AND CREDIT INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| Annual Turnover |  | Bank name: |  |
| Credit Amount Required: |  | Bank Branch: |  |
| Credit Days Required: |  | IFSC: |  |
| Payment Mode: |  | Account number: |  |
| GST NO : |  | Type of account: | Savings  Current  Other |

# PRIMARY AND SECONDARY CONTACT DETAILS

|  |  |  |  |
| --- | --- | --- | --- |
| In charge for Accounts/Payments |  | Phone |  |
| Reporting to:- |  | Fax |  |
| Address 1 |  | E-mail |  |
| Address 2 |  | Other |  |
| In Charge for Shipments |  | Phone |  |
| Reporting to:- |  | Fax |  |
| Address 1 |  | E-mail |  |
| Address 2 |  | Other |  |
| Director/Owner/Partner |  | Phone |  |
| Director/Owner/Partner |  | Fax |  |
| Address 1 |  | E-mail |  |
| Address 2 |  | Other |  |

# agreement

1. All invoices are to be paid without any deviation from the agreed Credit days and Amount as per agreement.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize **CARGO XMAN PVT LTD** to make inquiries into the banking and business/trade references that you have supplied.

# SIGNATURES

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Signature |  |
| Name and Title |  | Name and Title |  |
| Date |  | Date |  |

# ACKNOWLEDGMENT / APPROVAL STATUS (to be filled by cargo xman staff)

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Credit Amount Approved: |  |
| Name and Title |  | Credit Days Approved: |  |
| Date |  | Authorized Signatory |  |

* **THE END OF DOCUMENT -**