ON THE GREEN SIDE PTY LTD

6 Primrose Street Strand, Western Cape, South Africa.





STOCKIST APPLICATION FORM				
Regsitered Company Na	me:			
Trading Name:				
Registration Number:				
VAT number:				
Registered Physical Add	ress:			
Postal Address:				
Delivery Address:				
Type of Business:				
Will you stock product f	or retail	l (250g x 9) or produ	ct for food service (1	(g x 4):
Will you retail product o	online:			
Online store web addre	ss:			
Our products are frozen; do you have sufficient freezer storage (-18°C):				
Will you be able to adhere to our minimum order quantity of R2 000 ex VAT per order:				
(*DLE	ACE NOTE	orders loss than P2 000	will incur a delivery fee o	f P190 av VAT*)
(FLL)	ASL NOTE	orders less than N2 ood	will lited a delivery jee o	THIOUEX VAT
Contact Details:				
Contact person:			Designation:	
Email:			Mobile:	
	AF	PPLICATION FOR CRE	DIT FACILITY (30 DAY	S):
Responsible Person:			Designation:	
Email:			Contact number:	
Names of directors/part	tners/m	embers:		
Full Name:			ID number:	
Full Name:			ID number:	
Full Name:			ID number:	
Full Name:			ID number:	
			116	
Bankers:			Branch:	
Account number:			Limit required:	
I, the undersigned, he	reby cer	rtify that I am duly a	uthorised to sign this	application for credit facilities.
Full Name:			Signed at:	
			Designation:	
Signature:			Date:	