Callide Dawson Couriers

Phone: 0428 939 551 I Fax: 748 364 711 I P.O. Box 9505, Park Avenue, QLD, 4701

Email: paul@cdc.express I www.cdc.express

APPLICATION FOR COMMERCIAL CREDIT - 14 DAY FROM INVOICE DATE

CUST	TOMER ACCOUNT DETAILS: (Hereinafter referred to as the "C	ustomer").		
1.	Account to be in the name of Al	BN No:		
2.	Account postal address:			
3.	Trading address (if different from mailing address)	····		
4.	Registered Office (if Company)	· · · · · · · · · · · · · · · · · · ·		
5.	Account Contact Name:	·		
6.	Business Structure: Sole Trader Partnership Trading Name for a Pty Ltd Company	□ Pty Ltd Company □ Other		
	Nature of Business			
7.	Are Trading Premises Owned □ Yes □ No or Leased?	☐ Yes ☐ No		
8.	Proprietor(s)/Partner(s)/Individual(s)			
	Full Name Residential Address Teleph	one No: Driver Licence No:		
9.	Trade References: (Minimum of three to be supplied) Supplier: Branch: Contact name: Telephone/Fax No: Average Monthly Purchase:			
	- Station Station Station Station Station Station			
10.	Bank: Branch:	Acct No:		

I/WE THE CUSTOMER ACKNOWLEDGE AS FOLLOWS:

11. **PERSONAL GUARANTEE & INDEMNITY**. That if the Customer is a Company, then the Directors will execute the Personal Guarantee & Indemnity attached with this Application.

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1 () () () ()	notice or court procee Controller or Managing Customer does not ir formally through a co directors have been a	IRE. The Customer Widings that may lead to Controller, Receiver of tend to enter into any furt, or otherwise. Further director of a company rupt or entered into an J.	Bankruptcy, Apport Receiver Manag r scheme of arrang ther the Custome r placed in liquidat	pintment of an Admir er or Liquidator, and gement with credito er Warrants that nor ion or administration	nistrator, that the rs either ne of its
repo	rting agency details of	uthorise Callide Dawso your personal and cor urpose of assessing thi	nmercial credit info	ormation if required b	

THIS IS TO CERTIFY: that I/We have read, understand and accept the Commercial Credit Trading Terms and Conditions, and further acknowledge that I/We understand & accept paragraphs 11 - 13 above, and that I/We are authorised to make this application on behalf of the Customer, and without undue pressure or unfair tactic, append my/our signature hereunto:

APPLICATION:					
*** NOTE: IF COMPANY SEE ATTACHED FOR PERSONAL GUARANTEE & INDEMNITY ***					
Signature:	Date:				
Printed Name:	Position/Title:				
Signature:	Date:				
Printed Name:	Position/Title:				