



**UNITED FLUID POWER**

ACN: 609 632 895  
ABN: 71 609 632 895

**PERTH OFFICE:**

9 Kalmia Road  
Bibra Lake WA 6163  
P.O. BOX 5214 SOUTH LAKE WA 6164  
PHONE: +61 8 9418 8522  
FAX: +61 8 9418 8599

**APPLICATION FOR 30 DAYS CREDIT ACCOUNT  
PRIVATE AND CONFIDENTIAL**

**ACCOUNT TO BE OPENED IN THE NAME OF: (REGISTERED NAME)**

**ACN NUMBER:** \_\_\_\_\_ **ABN NUMBER:** \_\_\_\_\_

**TYPE OF BUSINESS**

INCORPORATED COMPANY  DATE OF INCORPORATION \_\_\_/\_\_\_/\_\_\_ STATE OF INCORPATION \_\_\_\_\_  
PROPRIETARY CO.  LIMITED COMPANY  PUBLIC COMPANY  OTHER  \_\_\_\_\_

**DIRECTORS/PARTNERS**

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

**ANTICIPATED MONTHLY CREDIT REQUIRED \$**

**MAILING ADDRESS FOR CORRESPONDENCE/ACCOUNTS** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**PHONE NO:** \_\_\_\_\_  
**FAX NO:** \_\_\_\_\_  
**EMAIL:** \_\_\_\_\_

**DELIVERY ADDRESS** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**PHONE NO:** \_\_\_\_\_  
**FAX NO:** \_\_\_\_\_

**ACCOUNTS CONTACT**

\_\_\_\_\_  
\_\_\_\_\_

PHONE NO: \_\_\_\_\_

FAX NO: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**PREVIOUS COMPANY OR TRADING NAME(S) (IF ANY)**

\_\_\_\_\_

**PARENT/HOLDING COMPANY NAME AND ADDRESS (IF ANY)**

\_\_\_\_\_

**BUSINESS REFERENCES**

**COMPANY**

**PHONE NO:**

**FAX NO:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**AGREEMENT**

I/We \_\_\_\_\_ hereby agree to abide by the attached terms and conditions and make payment in full of all debts by me/us with UNITED FLUID POWER on the basis of the agreed Terms of Trading which are "strictly nett 30 days" payment due 30 days after the end of the month in which the purchase(s) is (are) made unless previously agreed in writing.

The customer will be liable for all costs incurred by UNITED FLUID POWER in the collection of debts which have breached our agreed terms and conditions of trade.

SIGNATURE OF AUTHORISED PERSON \_\_\_\_\_ DIRECTOR / GENERAL MANAGER

NAME OF AUTHORISED PERSON \_\_\_\_\_ COMPANY SECRETARY  
(DELETE WHICHEVER IS NOT APPLICABLE)

PLEASE SIGN THIS DOCUMENT WHERE INDICATED AND RETURN TO



**UNITED FLUID POWER**

P.O. BOX 5214 SOUTH LAKE WA 6164

**TELEPHONE:** +61 8 9418 8522 **FAX:** +61 8 9418 8599 **EMAIL:** [admin@unitedfluid.com.au](mailto:admin@unitedfluid.com.au)