## Filtration Solutions Ltd

## Right from the start

Credit application form for				
Registered Company Name:				
Trading As:	rading As:		_P.O. Box:	
Physical Address:				
Registered Address:	E-mail:			
Phone:	_Mobile:	Fax:		
Trading (circle one): Sole Trader	Partnership	Limited Company	Other:	
What is your core business?				
Company number:		Date of Incorporation:		
No. of Employees:		Annual Turnover: \$		
Name of Shareholder/Director:				
Phone (other than business):	Land	Mobi	le	
Contact Address:				
Name of Shareholder/Director:				
Phone (other than business):	Land	Mobi	le	
Contact Address:				
Name of Shareholder/Director:				
Phone (other than business):	Land	Mobile		
Contact Address:				
Bank Name <u>:</u> Branc	:h <u>:</u>	_ How many years with them?		
Current Trade References who we	can contact			
Business Name:	_Contact <u>:</u>	Ph.:		
Business Name:	_Contact <u>:</u>			
Business Name <u>:</u>	Contact:	Ph.:		

Please note: This application form will NOT be accepted by Filtration Solutions Limited unless it is signed by a Director / Partner and / or Owner of the company applying for the credit. As such, a facility may be denied if ANY of the terms are deleted.

I, undersigned, hereby declare: (a) the above facts are true and correct. (b) acknowledge and accept Filtration Solutions Limited's standard terms and conditions of sale as attached, or as per published on www.filtrationsolutions.co.nz or on any particular quotation. (c) agree that any changes to the legal entity must be notified to Filtration Solutions Limited within 14 days of the changes becoming effective. (d) acknowledge that the terms of trade create a security interest in the products or goods sold in terms of the standard conditions and the Personal Properties Securities Act 1999 and you may at any time you deem necessary secure interest under any of these terms on the personal properties securities register.

Director Signature _	Print Name: _	Print Name:		
Address:		Date:		