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APPLICATION FOR CREDIT FACILITIES

TRADING NAME: _____

HOLDING COMPANY: _____

POSTAL ADDRESS: _____

CODE: _____

DELIVERY ADDRESS: _____

PHONE NO : _____ FAX NO _____

EMAIL : _____ WEB: _____

CERTIFICATE NO. OR REG.NO. _____

TYPE OF BUSINESS(TICK WHERE APPLICABLE)

PUBLIC COMPANY	PRIVATE COMPANY	SOLE PROPRIETORSHIP	PARTNERSHIP	CLOSE CORPORATION
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PREMISES(TICK WHERE APPLICABLE)

OWNED	RENTED	OWNERS NAME :
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CREDIT LIMIT REQUESTED _____

NAMES AND HOME ADDRESSES OF PARTNERS, DIRECTORS, OWNERS OR MEMBERS	IDENTITY NUMBER	TELEPHONE NUMBER

TRADE REFERENCES (PLEASE LIST MAJOR CREDITORS)

1. _____ TEL: _____
2. _____ TEL: _____
3. _____ TEL: _____

BANKING DETAILS:

BANK NAME: _____ BRANCH: _____

ACC NO: _____

LIST SURETIES, NOTARIAL BONDS, LIQUIDATIONS, ETC AGAINST THE COMPANY OR ANY OF ITS PRINCIPALS

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, I AGREE TO ABIDE BY THE COMPANY'S STANDARD CONDITIONS OF SALE AS SET OUT BELOW

TERMS AND CONDITIONS

I/WE APPLY FOR CREDIT TO BE GRANTED TO ME/US BY YOUR FIRM IN RESPECT OF GOODS TO BE SUPPLIED AND/OR SERVICES TO BE RENDERED UPON THE FOLLOWING TERMS AND CONDITIONS

1. NOT WITHSTANDING THE GRANTING OF CREDIT FACILITIES TO ME/US YOU SHALL AT ANY TIME, AND IN YOUR SOLE DISCRETION WITHHOLD SUCH FACILITIES AND REQUIRE REPAYMENT FOR ANY ACCOUNT
2. I/WE UNDERTAKE TO PAY ANY ACCOUNT RENDERED WITHIN A PERIOD OF 30 DAYS RECKONED FROM THE 30TH DAY OF THE MONTH DURING WHICH CREDIT WAS GRANTED
3. I/WE UNDERTAKE TO PAY ALL LEGAL EXPENSES INCURRED IN CONNECTION WITH THE RECOVERY OF ANY ACCOUNT DUE BY ME/US, INCLUDING ALL COLLECTION CHARGES, AS BETWEEN ATTORNEY AND CLIENT WHICH MAY BE PAYABLE IN RESPECT OF THE COLLECTION OF SUCH ACCOUNT.
4. I/WE AGREE THAT THE ADDRESSES GIVEN SHALL BE MY/OUR DOMICILLEM CITANDI ET EXECUTANDI FOR ALL PURPOSES UNDER THIS AGREEMENT, WHETHER IN RESPECT OF COURT PROCESS, NOTICES OR OTHER DOCUMENTS OF COMMUNICATIONS, OF WHATEVER NATURE.
5. SHOULD IT BE NECESSARY FOR YOU TO INSTITUTE LEGAL PROCEEDINGS FOR RECOVERY OF ANY AMOUNT DUE BY ME/US THEN I/WE CONSENT THAT THE MAGISTRATES COURT SHALL HAVE JURISDICTION TO HEAR AND DETERMINE SUCH ACTION
6. I/WE UNDERTAKE TO NOTIFY YOU WITHIN SEVEN (7) DAYS OF ANY CHANGE IN CONTACT DETAILS OR ADDRESS.

SHOULD I/WE REQUIRE EXTENDED CREDIT FACILITIES, I/WE UNDERTAKE TO APPLY FOR YOUR CONSENT TO ANY VARIATION OF THE ABOVE CONDITIONS BEFORE INCURRING THE DEBT, AND IN SUCH EVENT I/WE AGREE TO ABIDE BY ANY CONDITIONS OR STIPULATIONS IMPOSED BY YOU AS A CONDITION PRECEDENT TO THE GRANTING OF SUCH EXTENDED FACILITIES.

NAME AND TITLE OF SIGNATORY

SIGNATURE AND RUBBER STAMP

SIGNED BY A PERSON WHO WARRANTS
HIS /HER AUTHORITY TO REPRESENT THE
CUSTOMER IN AGREEING TO THESE
TERMS

DATE: _____