



Seven Star Passenger Service

ACCOUNT APPLICATION FORM

Items in this box are for office use only		Date Received _____	
<input type="checkbox"/> New Account	<input type="checkbox"/> Change of Address	<input type="checkbox"/> Close Account	<input type="checkbox"/> Change of Title
To be completed by [Customer] [Supplier/ Sales Representative]			
Full Legal Title and Trading Name : _____			
<input type="checkbox"/> Sole Trader	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Company	
<input type="checkbox"/> Other	<input type="text"/>	Company. No.	
Delivery Address			
Name _____			
Street _____			
Town _____			
Country _____			
Postcode _____		Phone Number _____	
Statement Address (if same as delivery address, please state)			
Name _____			
Street _____			
Town _____			
Country _____			
Postcode _____		Phone Number _____	
Business Activity (please specify _____)			

Method of Payment :

<input type="checkbox"/> Cheque	<input type="checkbox"/> Direct Debit	<input type="checkbox"/> Other
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If other please specify: _____

I/We request you to open a Credit Account in the name of:

With a Proposed Credit Limit of: _____ per month

Including GST: _____ per month

Agreed Credit Period : _____ days

Trade References

I/We authorise you to take up references at any time from the under mentioned bank and trade sources (we will make searches with a credit reference agency, which will keep a record of those searches and will share that information with other businesses. We may also make enquiries about the principal directors with a credit reference agency.):

1. Name _____ Account Number _____

Full Address _____

2. Name _____ Account Number _____

Full Address _____

3. Name _____ Account Number _____

Full Address _____

Contact for Payment

Name _____

Position _____

Tel No. _____ Fax No. _____

Details of Owner/ Partners/ Directors

We have read understood and retained a copy of your conditions of sale (including the retention of title clause) and agree to trade in accordance with these for any goods supplied. We accept that title to all goods supplied to us will remain vested in Seven Star Passenger Services (Adelaide) Pty Ltd ACN 167 976 605 until all amounts outstanding from us on any account have been paid in full to Seven Star Passenger Services

I/We also agree to comply with your settlement terms (specified within your conditions of sale).

I attach a sample of my/ our headed paper with this form.

1. Name _____
Signature _____
Home
Address _____

2. Name _____
Signature _____
Home
Address _____

3. Name _____
Signature _____
Home
Address _____

Yours Sincerely,

Seven Star Passenger Service
U3/23A King William Rd.
Unley S. A. 5061

Email: admin@sevenstarpassengerservice.com.au