



OZRAM
HYDRAULIC SERVICES
TOWNSVILLE
The Fluid Power Professionals

**Manufacture
Repairs
Sales**

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CONFIDENTIAL CREDIT APPLICATION

FOR A CREDIT ACCOUNT AND A SUPPLY AGREEMENT

DETAILS OF APPLICATION:

1. TRADING NAME: _____

ABN _____

Business Address _____

Postal Address _____

Business Phone _____ Fax _____ Email _____

Business Address Premises – Owned, leased, or rented? _____

2. COMPANY NAME (If Applicable): _____

ACN _____

Postal Address _____

Registered Address _____

Nominal Capital \$ _____ Paid up Capital \$ _____

3. SOLE TRADER/ALL PARTNERS OF PARTNERSHIP/ALL DIRECTORS OF COMPANY:

NAMES & ADDRESSES

- (i) Sole Trader
- (ii) All Partners of Partnership
- (iii) All Directors of Company

(i) Full Name _____ DOB _____

Residential Address _____

Phone No _____ Fax _____ Mobile _____

(ii) Full Name _____ DOB _____

Residential Address _____

Phone No _____ Fax _____ Mobile _____

(iii) Full Name _____ DOB _____

Residential Address _____

Phone No _____ Fax _____ Mobile _____

(iv) Full Name _____ DOB _____

Residential Address _____

Phone No _____ Fax _____ Mobile _____

4. TRUST: Is the applicant Company a trustee for a Trust? Yes _____ No _____

If Yes, please provide full details of Trust complete with a copy of Memorandum and Articles of Association plus a copy of a stamped Trust Deed with this application.

5. NATURE OF BUSINESS: Please provide full description of the nature of the business including length of time in business.

Date Business Commenced _____

6. BANKING DETAILS:

Bank Name _____ Branch _____

Account Name _____

BSB No. _____ Account No. _____

7. ESTIMATED MONTHLY PURCHASES \$

8. TRADE REFERENCES: (Minimum 3)

Name	Address	Contact Ph. No.
1.		
2.		
3.		
4.		