



Application for 30 days Credit Account

1-3 Geddes St., Mulgrave VIC 3170 Australia
t: 03 9560 1788 f: 039560 0764 ABN:89605940985

www.visitonline.com.au

www.visit.com.au

administration@visit.com.au

Office Use Only:
Acc. No

Date:--/--/--	Are you taking over a business that is already a VISIT customer? Yes <input type="checkbox"/> No <input type="checkbox"/>
	If Yes, what is the name (or Account No.) of the current business?.....

Business contact information

Registered Business Name:	ABN/ACN::
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Customer Trading Name (if different to above)
:

Company <input type="checkbox"/>	Sole trader <input type="checkbox"/>	Trustee Co. <input type="checkbox"/>	Partnership: <input type="checkbox"/>	Government/Statutory body: <input type="checkbox"/>	Other: <input type="checkbox"/>
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Proprietor/Director

Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> First Name: Last Name:	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> First Name: Last Name:
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Telephone/Mobile No:	Telephone/Mobile No:
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In business since:	Previous Business Name (if applicable)
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Business Delivery Address:

Address::

City:	State:	Postcode:
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Telephone:	Fax:	E-mail:
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Any special instructions:

Invoice/Correspondence Address: (if different to above)

Address::

City:	State:	Postcode:
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Contact Information: Sales/Buyer

Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> : First Name: Last Name:	Position:
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Email Address:	Telephone: 0- ---- ----	Mobile:
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Contact Information: Accounts Payable:

Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> : First Name: Last Name:	Position: Telephone: 0- ---- ----
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Email Address for Statements:

Order Requirements:

Is order number required on deliveries? Y <input type="checkbox"/> N <input type="checkbox"/>	Do you accept backorders? Y <input type="checkbox"/> N <input type="checkbox"/>
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Three Business/Trade References (Note – that tobacco and/or beverage companies don't provide trade references)

Company Name & Contact:	Company name & Contact:	Company name & Contact:
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Telephone/Mobile:0- ---- ----	Telephone/Mobile:0- ---- ----	Telephone/Mobile:0- ---- ----
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E-mail:	E-mail:	E-mail:
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Trading Terms and Conditions Agreement

- I/We agree that VISIT Group P/L (the Seller) may give or seek any information about the applicant's commercial credit worthiness, as far as permitted by law.
- I/We understand and agree that terms are strictly net 30 days, i.e. payment is due within 30 days of the end of the month of the invoice e.g. invoice date 14 April – payment due by 30 May.
- VISIT Group reserves the right to stop supply and/or take legal action for accounts in arrears.
- The applicant is liable for all costs, fees and charges incurred by the Seller in recovering any monies owed to the Seller (including Collection Agency commissions and Solicitors/client costs).
- Freight and other ancillary services are charged to the applicant at cost.
- Ownership of goods transfers to the applicant on receipt of payment for goods.
- I/We understand (the undersigned) and agree to comply with the Trading Terms and Conditions of VISIT Group Pty Ltd. (please complete for your application to be processed)

Signatures of Proprietors or Directors		Office use only			
.....	AM Initials	TER	Email	
Name:.....Date.....	Name:.....Date.....			Memo	
		AM No.	FGT	VOL	
				Email	