

Please complete and return original to



Sea Swift Pty Ltd, PO Box 6755 CAIRNS QLD 4870

Ph: 40351234 Fax: 40356091 Email: remit@seaswift.com.au

APPLICATION FOR CREDIT, CREDIT TERMS & GUARANTEE

APPLICANT DETAILS

Entity type: Private Company / Public Company / Partnership / Sole Trader (circle one)

Entity Name: _____

ACN: _____ ABN: _____

Trust Name: _____

(if applicable)

Trading Name: _____ Vessel Name (if applicable) _____

Indicate with * which name you wish to show on your invoices and ensure goods are delivered in this name

Street Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Telephone No: _____ Fax: _____

Mobile No: _____ Drivers Licence No: _____

Type of Business: _____

How long Established: _____ Head Office: (if applicable) _____

Account Contact: _____ Email: _____

Credit Limit Requested (subject to approval): Monthly \$ _____

Bank: _____ BSB/AC No: _____

Method of Payment: Electronic / Cheque / Credit Card / Bpay (circle one)

TRADE REFERENCES

| Business Name | Contact Person | Telephone No | Average Monthly Purchases |
|---------------|----------------|--------------|---------------------------|
| | | | |
| | | | |
| | | | |

If the Applicant is a trustee of a trust then a copy of the trust deed and all variations are to be provided at the time of completion and execution.

If the Applicant is a Company then the Directors must provide personal guarantees and complete this section of the document.

EXECUTED AS AN AGREEMENT

SIGNED by _____)
As Applicant in the presence of _____) _____) _____)
Director/Sole Trader/Partner Director/Sole Trader/Partner

Witness

SIGNED by _____ Name _____

GUARANTEE

Guarantor 1

Name: _____ Position Held: _____

Address: _____ Post Code: _____

Telephone No: _____ Mobile No: _____ Fax No: _____

Guarantor 2

Name: _____ Position Held: _____

Address: _____ Post Code: _____

Telephone No: _____ Mobile No: _____ Fax No: _____

By signing or executing below, each Director of the applicant as Guarantor agrees to be bound as Guarantor in accordance with this document including clause 12 of the Credit Terms.

SIGNED by _____ Print Name _____
As Guarantor in the presence of:

Witness _____ Print Name _____

SIGNED by _____ Print Name _____
As Guarantor in the presence of:

Witness _____ Print Name _____

Please tick the box to show you have read, understood and will keep your account within our terms and conditions.