

ACTION FASTENERS PTY. LTD.

ABN 63 084 769 880

12 SCHOFIELD ST, RIVERWOOD NSW 2210

Tel: +61 2 9533 3688 Fax: +61 2 9533 3858

ACCOUNT APPLICATION

Company		Phone	A.B.N.:
Address			<input type="radio"/> Company
		Fax	<input type="radio"/> Partnership
E-Mail			<input type="radio"/> Other

Owner's Details

Name	1.	2.	3.
Residence			
Phone			
Mobile/E-Mail			

Background

Capital ~ Nominal \$
~ Paid Up \$

Business Started / /
N^o of Employees

Trade References

Company	1.	2.	3.
Contact			
Phone			
E-Mail			
Office Use	\$ <input type="text"/> pa No. of Days to Pay <input type="text"/>	\$ <input type="text"/> pa No. of Days to Pay <input type="text"/>	\$ <input type="text"/> pa No. of Days to Pay <input type="text"/>

Conditions

I/we, the undersigned, hereby apply for a standard 30 day account with Action Fasteners Pty Ltd. I/we agree that payment for any goods or services invoiced will be made within 30 days from the date of the statement and if at any time any monies become overdue then the whole debt becomes due and payable and that Action Fasteners Pty Ltd shall be at liberty to sue for recovery of the whole debt.

I/we understand and agree that ownership of the goods and services will not transfer to me or my organisation until payment in full is made to Action Fasteners Pty Ltd for all goods delivered and services provided.

I/we also understand that these conditions are only part of the total conditions of sale, other conditions being on the back of the invoice or direct from Action Fasteners Pty Ltd.

Duly Authorised to Sign

Duly Authorised to Sign

Witness

Print Name

Print Name

Print Name

Date

Date

Date

FIX & FORGET WITH STORM-TITE™

sales@actionfasteners.com.au