



Application for Commercial Account

Trading Name:

Account No.

Office Use

Company Name:

ABN:

Trading Address

Pty. Ltd. Co. Partnership Trust
Ltd. Co. Sole Trader Other?
(x whichever applicable)

Suburb / Town

Postcode

Phone

Fax

Email

Mobile

Period of Current Ownership years months

Trade References Company
1
2
3

Phone/fax

Bank Financial

Details of Directors/Partners/Proprietor

1. Name Address Home Phone No.
2. Name Address Home Phone No.
3. Name Address Home Phone No.

Information provided herewith is considered confidential and will only be used for account application purposes. Jaspa Herington Pty Ltd, may use the information to obtain information for credit reporting agencies. Page 1 Of 2.....



Terms and Conditions of Sale

In the event that Jaspa Herington Pty. Ltd. agree to grant credit for the supply of goods, then the applicant acknowledges and agrees to the following:

- 1. **Trading Terms** - Settlement terms are strictly **nett 30 days** from the end of the month of invoice, unless other terms have been expressly arranged.
- 1.(a) **Refusal of Supply** – Jaspa Herington Pty. Ltd. reserves its right to refuse supply to accounts that fall outside of these terms
- 2. **Title** - Ownership of products delivered to you shall not pass until full payment is made.
- 2.(a) **Recovery** - You agree our agents or employees shall enter your premises to recover goods should satisfactory resolution of these terms not be fulfilled.
- 3. **Risk** - Following receipt of the goods, you accept all risk for loss or damage.
- 4. **Minimum Order** Quantities - **\$300** per delivery destination in carton quantities.
- 5. **Claims** - Any claims pertaining to the delivery and invoicing of an order must be made within 7 days of the delivery.
- 6. **Personal Guarantees** – Jaspa Herington Pty. Ltd. does not ask for personal guarantees.

We will however closely monitor receivables and the applicant should be aware that our credit policy ensures active pursuit of all accounts in arrears. A copy of this policy is available on request.

- 7. **Acknowledgement** - By ticking the box below, I confirm I have read the information above and look to a mutually rewarding association with 'Jaspa Herington'.

Please tick	
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By signing this application, you warrant that all information provided is true and correct and that you have such authority to sign on behalf of all the applicants or the corporation as appropriate.

Print Name:		Position:	
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Signed:		Date:	____ / ____ / 20 ____
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