

Credit Account Application Form for Companies

Please complete details

Company details

Trading name			
Registered name of company			
Address: delivery			
Address: postal			
Phone	()	Facsimile	()
		Mobile	
Invoice email address			
Test results email addresses			
Estimated \$ (dollar) spend per month	\$		
Registered office			
Date incorporated	/ /	Purchasing officer	
Co registration number		Financial controller	
Years in business		Accounts payable clerk	
Solicitor		Accountant and firm	
Bankers		Branch	
Directors names	Home address	Phone	Date of birth
			/ /
			/ /
			/ /
			/ /

Trade references (Please do not use Telco, power company or banks)

Reference 1		Phone	
Reference 2		Phone	
Reference 3		Phone	
Other relevant information			

Terms and conditions

Our terms and conditions are listed in the separate quotation document.

Terms of applications

The applicant hereby:

- a) Confirms that the information provided is correct;
- b) Agrees that all purchases from Watercare Services Limited ("the Company") shall be paid in full by the 20th day of the month following the issue of an invoice unless otherwise stated by direct credit;

Please allocate payments to the following;

Pay to the credit of Watercare Services Limited

Bank name

BNZ

Bank branch

NEWMARKET

Account name

WATERCARE SERVICES LIMITED

Bank

0 2

Branch

0 1 9 2

Account number

0 1 1 5 0 5 5

Suffix

0 0

- c) Authorises the Company to make any such enquiries as it deems necessary to establish the Customer's credit worthiness to its satisfaction;
- d) Agrees it will immediately advise the Company of any significant change in the information set out in this application or of any event which may materially affect such information;
- e) Agrees to pay for all orders placed with the Company by their employees on their behalf;
- f) Agrees to reimburse the Company for any costs incurred in the recovery of late payments;
- g) If the client does not pay the amount invoiced in full by the due date, the Client must, on demand, pay to Watercare interest at the rate of 12% p.a. calculated daily on the unpaid amount from the due date until payment is made in full.

☐

I agree to receive the newsletter and marketing updates from Watercare Laboratory Services. I understand that these communications may include information about products, promotions, and company news. My consent is voluntary, and I can unsubscribe at any time through the links provided in the emails.

Authorised signature

Print name

Position

Date

Privacy

The information supplied in this application form will be held and used by Watercare Services Limited staff. The information will not be disclosed by Watercare Services Limited unless legally required under the Local Government Official Information and Meetings Act 1987 or for one of the purposes in connection with its collection. The information supplied will be used for: assessing and processing this application and for administration purposes, updating Watercare Services Limited's records to ensure all records are accurate, providing Watercare Services Limited with statistical information to assist policy development. You have the right to request access to and correction of information collected.