

MATCHBURY ENTERPRISES PTY LTD

T/A SYKES TRANSPORT WA ABN: 74 058 749 036

13 BRADFORD STREET, KEWDALE WA 6105 PHONE - (08) 9353 5577 FAX - (08) 9353 2270

EMAIL ACCOUNTS: s.houghton@sykestransport.com.au

30 DAY NETT CREDIT ACCOUNT APPLICATION FORM

DATE: _____

COMPANY NAME: _____

TRADING NAME: _____ ABN: _____

TRADING ADDRESS: _____

POSTAL ADDRESS: _____

PHONE NUMBER: _____ FAX: _____

TYPE OF BUSINESS: _____ DATE BUSINESS COMMENCED: _____

PREVIOUS TRADING NAME (if applicable): _____

NAME & ADDRESS OF DIRECTORS/PARTNERS/PROPRIETORS (This section must be completed in full)

NAME: TITLE: EMAIL:

HOME ADDRESS: PHONE NO:

NAME: TITLE: EMAIL:

HOME ADDRESS: PHONE NO:

NAME: TITLE: EMAIL:

HOME ADDRESS: PHONE NO:

ACCOUNT CONTACT NAME: _____ EMAIL: _____

EMAIL ADDRESS FOR INVOICES/STATEMENTS: _____

PURCHASE ORDER NUMBER REQUIRED: YES NO (please circle)

PLEASE SUPPLY THREE TRADE REFERENCES: (Must be completed in full)

NAME: _____

PHONE: _____ ACCOUNTS EMAIL: _____

NAME: _____

PHONE: _____ ACCOUNTS EMAIL: _____

NAME: _____

PHONE: _____ ACCOUNTS EMAIL: _____

OUR TRADING TERMS ARE STRICTLY 30 DAYS NETT FROM THE DATE OF INVOICE. FAILURE TO COMPLY WITH THESE TERMS WILL RESULT IN THE LOSS OF CREDIT FACILITIES. ALL INVOICES/STATEMENT WILL ONLY BE ISSUED VIA EMAIL.

ANY EXPENSES, COSTS OR DISBURSEMENTS INCURRED BY SYKES TRANSPORT WA IN RECOVERING ANY OUTSTANDING MONIES INCLUDING DEBT COLLECTION FEE'S AND SOLICITOR COSTS SHALL BE PAID BY THE CUSTOMER.

I/WE HEREBY AUTHORISE SYKES TRANSPORT WA TO MAKE SUCH AS THEY REQUIRE ESTABLISHING A CREDIT ACCOUNT FOR THE ABOVE COMPANY.

SIGNED BY THE GUARANTOR No 1: (Guarantor to honour all monies owing to Sykes transport WA - must be completed)

DIRECTORS/OWNERS NAME: _____ SIGNATURE: _____

IN THE PRESENCE OF WITNESS:

WITNESS NAME: _____ SIGNATURE: _____

DATE: _____

SIGNED BY THE GUARANTOR NO 2: (Guarantor to honour all monies owing to Sykes transport WA – must be completed)

DIRECTORS/OWNERS NAME: _____ SIGNATURE: _____

IN THE PRESENCE OF WITNESS:

WITNESS NAME: _____ SIGNATURE: _____

DATE: _____

SIGNED BY THE GUARANTOR NO 3: (Guarantor to honour all monies owing to Sykes transport WA – must be completed)

DIRECTORS/OWNERS NAME: _____ SIGNATURE: _____

IN THE PRESENCE OF WITNESS:

WITNESS NAME: _____ SIGNATURE: _____

DATE: _____

OFFICE USE ONLY:

AUTHORISED BY: NAME _____ DATE: _____