

MALVERN

321 Unley Road Malvern SA 5061
Tel 08 8272 8566 Fax 08 82714930
Email malvern@barrowandbench.com

GLENUNGA

499 Portrush Road Glenunga SA 5064
Tel 08 8379 9866 Fax 08 8379 5961
Email glenunga@barrowandbench.com

30 DAY ACCOUNT

For Corporation, Registered Business, Partnership or Single Trader.

In line with the Privacy Act, 2001, Barrow & Bench Mitre 10, is committed to ensuring the confidentiality and security of your personal information

PLEASE PRINT IN BLOCK LETTERS

Company or Business Name:

Address (NOT PO Box)

Post Code

Mailing Address (if different)

Post Code

Telephone

Fax

Mobile

Email

Contact Name

Nature of Business

How long in business?

Are your business premises owned/leased?

Builders License #

Garden Club

DIRECTORS / PROPRIETORS / PARTNERS DETAILS:

1. Full Name

Residential Address

2. Full Name

Residential Address

3. Full Name

Residential Address

PTO

CREDIT REFERENCES:

Name: Telephone: A/C No:

Name: Telephone: A/C No:

Name: Telephone: A/C No:

Estimated Monthly Purchases: \$

I/We Hereby grant permission for the above to be contacted for a Credit Reference.

I/We certify that the aforementioned information supplied is complete and true and correct and if credit is proved I/We undertake to pay for all the goods supplied in any month on or before the 25th day of the following month.

I/We understand that we are entitled to take off the settlement discount that is applicable only if the account is paid by the 25th of the following month.

I/We understand that if our account becomes overdue by 15 days it will be automatically suspended and contact will be made to determine when payment will be made. I/We also understand that if payment is not made within 7 days after that contact the account will be passed to a Debt Collector.

I/We agree to undertake to pay expenses incurred, or to be incurred in recovering from me/us all moneys payable.

It is agreed that title of goods supplied shall not pass until full payment for them has been made.

It is expressly understood and agreed that the account may be closed at anytime by either party and the total value of goods supplied will be paid immediately.

Signed:

Name:

Position Held:

Date:

Please return this form to one of our stores in person or by mail - please DO NOT FAX.

OFFICE USE ONLY

Comments Approved/Rejected

Signed by Credit Officer Date

Account No D/Code Credit Limit \$

Dear Valued Customer,

We are pleased that you have decided to open an account with Barrow & Bench and trust that you will be happy with the service that we can provide.

Our invoicing system works as follows:

- At the time of each purchase you will be asked to sign our electronic signature pad
- At each purchase you will then receive an invoice with this electronic signature displayed
- At the beginning of each month you will be sent a statement showing all transactions for the period along with the electronic signature displayed against each invoice to verify
- Each Statement showing Invoice, detailed, and the price before GST, including GST and the GST per item.

If you require any further information or assistance, please do not hesitate to contact Linda Provis on 08 8379 9866.