



**Complete and fax back to 011 972 4731**

**CREDIT APPLICATION**

Company name: \_\_\_\_\_  
Postal Address: \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
Telephone no: \_\_\_\_\_ Fax no: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Directors/Owners Names: 1. \_\_\_\_\_ ID no \_\_\_\_\_  
2. \_\_\_\_\_ ID no \_\_\_\_\_  
3. \_\_\_\_\_ ID no \_\_\_\_\_  
Company Reg no: \_\_\_\_\_  
Company VAT no: \_\_\_\_\_  
Type of Business \_\_\_\_\_  
Banker's name: \_\_\_\_\_ Branch \_\_\_\_\_  
Account no: \_\_\_\_\_  
Amount Credit required: \_\_\_\_\_

**TRADE REFERENCES**

1. Name: \_\_\_\_\_ Tel no: \_\_\_\_\_  
2. Name: \_\_\_\_\_ Tel no: \_\_\_\_\_  
3. Name: \_\_\_\_\_ Tel no: \_\_\_\_\_

**PERSON RESPONSIBLE FOR PAYMENT OF ACCOUNT: \_\_\_\_\_**

**OUR TERMS ARE 30 DAYS NETT!!**

I am fully authorized to sign this application form on behalf of the said business. I hereby declare that all information herein stated, is true and correct. I am aware, that if there is a default on payment of the above account, a blacklisting of the said account will come into effect.

Signed at: \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_\_\_\_

Witness: \_\_\_\_\_ Signature: \_\_\_\_\_  
Designation: \_\_\_\_\_

**Banking details**

**Rulerite Stationers, Nedbank Isando, Acc no: 1961329786, Branch code: 196142**

Director: Deborah Dos Santos