



CREDIT APPLICATION FORM

THIS ACCOUNT APPLICATION WILL BE ACKNOWLEDGED IN WRITING

REGISTERED NAME OF COMPANY			
TRADING NAME (if not company name)			
STREET ADDRESS		POSTAL ADDRESS	
PHONE NO		FAX NO	
REGISTERED ADDRESS OF COMPANY		AUTHORISED CAPITAL	\$
		PAID UP CAPITAL	\$
		DATE OF INCORPORATION	
NATURE OF BUSINESS			
NO OF YEARS IN THE BUSINESS		IF NEW, PLEASE STATE	
IF NEW, PLEASE GIVE PREVIOUS EMPLOYMENT OR BUSINESS			
FULL NAMES AND ADDRESSES OF DIRECTORS OF CURRENT COMPANY			
SURNAME	CHRISTIAN NAMES	PRIVATE ADDRESS	PRIVATE PHONE NO
NAME OF ACCOUNTANT		NAME OF SOLICITOR	
ADDRESS OF ACCOUNTANT		ADDRESS OF SOLICITOR	
NAME OF BANK		BANK BRANCH	
TRADE CREDIT REFERENCES (Nominate only business dealing with you on credit terms. If none, please give any personal dealings made on credit terms)			
NAME	ADDRESS OR BRANCH	PHONE NO	
1			
2			
3			
NAME OF PERSON TO CONTACT REGARDING THE ACCOUNT			
EMAIL ADDRESS		BUSINESS PHONE NO	



Terms of Credit

- 1 Payment is to be made within 14 days of invoice.
- 2 Port of Tauranga Limited ("POTL") reserves the right to pass any account onto debt collection agencies at the cost of the customer following a written warning of the same.
- 3 POTL reserves the right to refuse credit to any customers with overdue accounts outstanding.

Credit Agreement

- 1 The undersigned, for and on behalf of the Customer, hereby makes this application to open an account with POTL.
- 2 The undersigned acknowledges POTL's Terms and Conditions of Credit and agrees to abide by them. The undersigned agrees that such Terms and Conditions of Credit shall form the basis of a contractual relationship between the customer and POTL.
- 3 The undersigned represents and warrants that the undersigned is duly authorised to execute this application on behalf of the customer and that when so executed it shall be legally binding upon the customer.
- 4 The undersigned hereby authorises all individuals and firms mentioned in this credit application to respond fully and genuinely to all requests by POTL for credit information about the undersigned. The undersigned expressly waives any claims under the Privacy Act against such individuals for providing such credit information to POTL.
- 5 The undersigned hereby authorises POTL to respond fully and genuinely to all requests by third parties for credit information about the undersigned. The undersigned expressly waives any claims under the Privacy Act against POTL for providing such credit information to third parties.
- 6 The undersigned represents and warrants to POTL that the information provided herein is true and correct to the undersigned's best knowledge, information and belief.

AUTHORISED SIGNATURE	POSITION HELD	DATE

Bank Account Details:

Name: Port of Tauranga Limited
 Bank and branch: Bank of New Zealand, Mount Maunganui
 Account number: 02 0372 0115511 00

Accounts Receivable Contact Details:

Accounts Receivable
 Port of Tauranga Limited
 Private Bag 12504
 Tauranga Mail Centre
 Tauranga 3143

Direct dial: +64 7 572 8812
 Fax: +64 7 572 8800
 Email: accounts@port-tauranga.co.nz

