

CREDIT FACILITY APPLICATION

This form will be used by International Corrosion Services Pty Ltd ("ICS") to open an account in your trading entity's name

Client's Name:	ACN	& ABN:		
Trading Name:		Email:		
Postal Address:		Postcode:		State:
Billing Address:		Postcode:		State:
Telephone:	Mobile:	Fax:		
Representative's Name:	Position:		Tel:	
CREDIT/BUSINESS DETAILS				
Business Type:	Business Start Date:	Accounts Payable Co	ntact:	
Requested Credit Limit: \$	Est Monthly Purchases: \$	S	tart Date: _	
DETAILS OF OWNER/S* (if Sole Tr	ader) PARTNERS* (if Partnership) or DIRECTC	DRS* (if Company) or TRUS	STEE* (if Tru	st) *please indicate which
Full Name:		Full Name:		
Home Address:		Home Address:		
Mobile:		Mobile:		
Date of Birth:		Date of Birth:		
TRADE REFERENCES				
Supplier 1:	Email:		Tel:	
Address:		Postcode: _		State:
	Email:		Tel:	
				State:
	Email:			
have read and understand ICS' Te reference ICS - Supply of Goods and this Credit Facility Application and the Privacy and Personal Informat	above information is true and correct and that erms and Conditions (which can be found at ad Services Agreement v2.2 (in house) and whic agree to be bound by these conditions. I/We ion clause of the Terms and Conditions. I/We onally liable for the performance of the Clien	(https://internationalcs.cc ch form part of, and are int authorise the use of my/o agree that if I am/we are	om.au/term ended to be ur personal a director/o	<u>is-conditions/</u>), document e read in conjunction with, information as detailed in
CLIE	NT		ICS	
Signature:		Signature:		

Signature:	
Name:	
[PLEA	SE PRINT]
Position:	
[PLEA	SE PRINT]
Date:	
	Name:

INTERNATIONAL CORROSION SERVICES PTY LTD (ACN 111 437 686)