

Account Application Form

Full Legal Name: _____

Trading Name: _____

Billing Address: _____

Delivery Address: _____

NZ Company Number: _____ PISG Number: _____ (for Security Co's)

Phone Number: _____ Fax Number: _____

Main Contact Person: _____ Mobile: _____

Main Contact Email: _____

Accounts Contact: _____ Accounts Ph: _____

Accounts Email: _____

Type of Business:

Limited Liability Company Partnership Sole Trader

Nature of Business: _____

Director(s)/Partners Details:

Full Name: _____	Date of Birth: _____
Home Address: _____	
NZ Drivers Licence #: _____	Expiry Date: _____
Full Name: _____	Date of Birth: _____
Home Address: _____	
NZ Drivers Licence #: _____	Expiry Date: _____
Full Name: _____	Date of Birth: _____
Home Address: _____	
NZ Drivers Licence #: _____	Expiry Date: _____

Trade Credit References – not Utility Companies (all three are required):

1. _____	Account # _____	Phone: _____
2. _____	Account # _____	Phone: _____
3. _____	Account # _____	Phone: _____

Estimated Monthly Spend: \$ _____ Time in Operation: _____ YRS No. of Employees: _____

Purchase Order Required? _____ Approved way of ordering (please Circle): Email / Phone / Fax / Email

I/we certify (as a signatory to this application) that the above information is true and correct and that I am authorized to make this application on behalf of the Buyer and enter into the Terms and Conditions (overleaf).

I/we agree that Alliance Wholesale Limited ("you") may use my personal information, being to personal information about me which I or others provide to you to assess my credit worthiness and financial position in relation to this application for your management, administration, assessment and enforcement of the Buyers agreement with you and for promotional and marketing purposes. I understand that such information collected by you will be held by you at your address above and that I may access and correct that information by contacting you.

By signing this agreement, I/we authorize you to:

- Make enquiries, disclose and obtain any information, about me to and from anyone else (for example to and from credit reporting agencies such as Baycorp Advantage and Veda Advantage etc) for the purposes listed above and the provision of such information by anyone else to you. For example (but without limitation) you may obtain a credit check on me and if there is a default in payment obligation you may give information about that default to your credit reporting agency.
- Register a security interest with the New Zealand PPSA (refer clause 13 overleaf).
- Consider this signed application as consent for a binding Personal Guarantee (refer clause 14 overleaf) for payment of any amounts unpaid by the Buyer. The Individual(s) listed above agree to pay all debts owed to you if the Buyer defaults. If the Buyer goes into liquidation or enters a personal insolvency procedure, the Buyer allows you to recover what is owed from the Guarantor (Individual, Partner(s) or Director(s)).
- Send me promotional and marketing information.

I/we understand that all information you provide to your credit reporting agency will be held and used by that agency for its credit reporting service and the agency may give such information to its customers who use its service.

IN SIGNING THIS DOCUMENT THE BUYER CONFIRMS THAT THE TERMS AND CONDITIONS OVERLEAF FORM PART OF THIS APPLICATION AND THAT THE BUYER IS BOUND BY THE TERMS AND CONDITIONS

Signed By:

Director/Partner: _____ Name: _____ Position: _____

Director/Partner: _____ Name: _____ Position: _____

Dated this _____ day of _____ 20 _____