LSM TECHNOLOGIES ...on the move!

Web Site:	www.@lsmtechnologies.com.au
Emails:	admin@lsmtechnologies.com.au
	tech@lsmtechnologies.com.au

Check Lists + Forms

CList + Form For: CUSTOMER CREDIT APPLICATION FORM

I / WE HEREBY APPLY FOR A CREDIT TRADING ACCOUNT AND SUBMIT THE FOLLOWING CONFIDENTIAL INFORMATION FOR THIS PURPOSE ONLY:

(PLEASE ANSWER ALL QUESTIONS)

Type of Organisation:	Sole trader ☐	Partnership ☐
	Public company ☐	Private company ☐

Full Trading Name:	
A.C.N. Or A.B.N.:	
Postal Address:	
Business Address:	
Registered Office Address:	
Site / Location Address:	
Telephone #	( )
Facsimile #	( )
Email Address	

Premises:	Owned ☐ Rented ☐ Leased ☐
Type of Business:	
Date Trading Commenced:	
Please state if applicant is a Trustee for a Trust:	Yes ☐ No ☐
Accounts Contact Name:	
Title:	
Email Address:	

Bank:	
Branch:	
Account #:	

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Amount of Credit required:	$

Please supply three trade references:

Name:		Phone:	
		Email:	
Name:		Phone:	
		Email:	
Name:		Phone:	
		Email:	

Proprietors/Partners/Directors:

Name:		Address:	
Name:		Address:	
Name:		Address:	
Name:		Address:	

I (as a bonafide company representative) hereby agree to your trading terms of 30 days from invoice date and acknowledge that this is binding.

SIGNED: _____

NAME: _____

TITLE: _____

DATE: _____

Please return completed form to:

LSM Technologies Pty Ltd Attn: Administration
fax: 07-3725 8199
email: admin@lsmtechnologies.com.au
SEVENTEEN MILE ROCKS QLD 4073

Department	Administration	Pages	2 of 2	Issue Date	20/05/05
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