

**APPLICATION FOR CREDIT ACCOUNT**  
(Please Print in Block Letters)



**ACCOUNT NUMBER** \_\_\_\_\_

**IVR PIN** \_\_\_\_\_

**Account Details**

Applicant Trading / Customer Name \_\_\_\_\_

**Address / Phone Details**

Box No \_\_\_\_\_

Suburb \_\_\_\_\_ City \_\_\_\_\_ Post Code \_\_\_\_\_

Street No \_\_\_\_\_ Street \_\_\_\_\_

Suburb \_\_\_\_\_ City \_\_\_\_\_ Post Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Mobile \_\_\_\_\_

**Contact Details**

Manager (Decision Maker)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Job Title \_\_\_\_\_ Email \_\_\_\_\_

Accounts (Contact for Payment)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Job Title \_\_\_\_\_ Email \_\_\_\_\_

Dispatch Manager (Person Who Tickets Parcels)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Job Title \_\_\_\_\_ Email \_\_\_\_\_

**Business Details**

Nature of Business \_\_\_\_\_

Business Type \_\_\_\_\_ Company \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Trader \_\_\_\_\_ Other \_\_\_\_\_

(Please Circle One)

Year Trading Commenced \_\_\_\_\_ Company Number \_\_\_\_\_

Directors \_\_\_\_\_

Credit Limit Required \_\_\_\_\_

**Reference Details**

No.	Business Name	Reference #	Phone #
1			
2			
3			

I/We hereby acknowledge, agree to and accept Parcel Express Limited terms and conditions as outlined in the attached Terms and Conditions of Carriage.

Name and Title \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

**For Office use Only:**

Rep Code \_\_\_\_\_ Rep Name \_\_\_\_\_ Courier Run Number \_\_\_\_\_

**Credit Reference Details**

1	
2	
3	

Signed: Credit Controller \_\_\_\_\_ Date \_\_\_\_\_