



APPLICATION FOR CREDIT
REGISTERED BUSINESS / ORGANISATIONS / PERSONAL ACCOUNTS

PLEASE COMPLETE THIS FORM IF YOU ARE A PERMANENT HIRER
 i.e. if you are booking Council premises more than ten (10) times per year

TERMS NET 14 DAYS

If payment is not received by Council on or before the due date, future use of facilities may be denied. Legal action may commence resulting in additional costs to the debtor.

Estimate amount of credit required per month = _____

Account Name: *(company/individual/organisation)* _____

Address: _____

Phone No.: _____

Signature: _____

COMPANY ACCOUNTS/ORGANISATIONS

I *(Full Name)*: _____

of *(Home Address)*: _____

Driver's Licence No.: _____

Date of Birth: _____

state that I am a Director of the Applicant Company and I hereby guarantee and accept personal liability for payment by such company of all monies, costs, damages, and interest which may become due and payable but which remain unpaid by the company from time to time.

Signature: _____

Title: _____

Date: _____

Witness: _____

N.B. If your organisation is not a registered business please supply the name and address of the responsible officer. The account will then be made out in joint names i.e. the organisation and the responsible officer.

BANK DETAILS

Bank: _____

Branch: _____

TRADE REFERENCES

	Company Name	Account No.	Phone No.
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

FOR COUNCIL USE	
Average amount of credit per month = _____	Account No: _____
Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No Revenue Officer: _____	Signature: _____