

COMMERCIAL CREDIT APPLICATION

TO: WRIGHT FOREST PRODUCTS PTY LTD – ABN 15 087 525 657

OF: 375 WESTS ROAD, WERRIBEE VICTORIA, 3030

(the “Supplier”)

CUSTOMER NAME AND ADDRESS INFORMATION

| | |
|---------------|--|
| Name: | |
| Trading Name: | |
| ACN Number: | |
| ABN Number: | |

TYPE OF BUSINESS

| Sole Trader | Partnership | Private Co (Pty Ltd) | Public Co (Ltd) | Trust (or Trustee for a Trust) |
|-------------|-------------|----------------------|-----------------|--------------------------------|
| | | | | |

GUARANTOR DETAILS

Each Director/Partner/Principal of the Customer must provide a Guarantee in the form requested by the Supplier. Please provide copy of driver’s licence in support.

| | |
|-------------------------|--|
| Name: | |
| Position: | |
| Address: | |
| Phone: | |
| Email: | |
| DOB: | |
| Drivers Licence No. | |
| Drivers Licence Expiry: | |

GUARANTOR DETAILS CONTINUED

| | |
|-------------------------|--|
| Name: | |
| Position: | |
| Address: | |
| Phone: | |
| Email: | |
| DOB: | |
| Drivers Licence No. | |
| Drivers Licence Expiry: | |

| | |
|-------------------------|--|
| Name: | |
| Position: | |
| Address: | |
| Phone: | |
| Email: | |
| DOB: | |
| Drivers Licence No. | |
| Drivers Licence Expiry: | |

| | |
|-------------------------|--|
| Name: | |
| Position: | |
| Address: | |
| Phone: | |
| Email: | |
| DOB: | |
| Drivers Licence No. | |
| Drivers Licence Expiry: | |

375 Wests Road | PO Box 615 | Werribee | VIC | 3030 | Australia
 T: +61 (0)3 9741 5633 | E accounts@wrightforestproducts.com.au
 ACN 087 525 657 ABN 15 087 525 657

ACCOUNT INFORMATION

| | |
|-------------------|--|
| Accounts Contact: | |
| Name: | |
| Email: | |
| Address: | |
| City: | |
| Post Code: | |
| Phone Number: | |

| | |
|----------------|--|
| Sales Contact: | |
| Name: | |
| Email: | |
| Address: | |
| City: | |
| Post Code: | |
| Phone Number: | |

| | |
|-------------------|--|
| Delivery Contact: | |
| Name: | |
| Email: | |
| Address: | |
| City: | |
| Post Code: | |
| Phone Number: | |

BUSINESS DETAILS

| | |
|--|--|
| Bank Name: | |
| BSB: | |
| Account No: | |
| Business Commencement Date: | |
| Annual Turnover: | |
| How long has business been conducted by present management (years/months): | |
| Estimated monthly purchase of Supplier's Goods \$: | |

CREDIT REQUIREMENTS

| | |
|--------------------------------|--|
| Amount of credit required \$: | |
|--------------------------------|--|

TRADE CREDIT REFERENCES

| | |
|------------|--|
| Name: | |
| ACN/ABN: | |
| Telephone: | |
| Email: | |

| | |
|------------|--|
| Name: | |
| ACN/ABN: | |
| Telephone: | |
| Email: | |

TRADE CREDIT REFERENCES CONTINUED

| | |
|------------|--|
| Name: | |
| ACN/ABN: | |
| Telephone: | |
| Email: | |

| | |
|------------|--|
| Name: | |
| ACN/ABN: | |
| Telephone: | |
| Email: | |

DECLARATION OF PURPOSE FOR WHICH CREDIT PROVIDED

| |
|--|
| <p><u>Important</u></p> <p>You should only sign this declaration if this loan is wholly or predominantly for:</p> <ul style="list-style-type: none"> • business purposes; or • investment purposes other than investment in residential property. <p>By signing this declaration you may lose your protection under the National Credit Code.</p> |
|--|

I/We declare that the credit to be provided to me/us by the Supplier is to be applied wholly or predominantly for:

- business purposes; or
- investment purposes other than investment in residential property.

Signed by a duly authorised representative of the Customer:

| | |
|---------------------|--|
| Name: | |
| Authority/capacity: | |
| Date: | |
| Signature: | |

CUSTOMER DECLARATION

I/We the Customer named above agree, declare and acknowledge that:

- a. The information provided in this Commercial Credit Application is true and correct;
- b. I/We request the Supplier to accept this Commercial Credit Application and hereby authorises the Supplier to investigate the above information with consideration to the extension of credit;
- c. I/We have been given a copy of the Supplier’s Terms and Conditions, and if this application is granted, the Supplier’s Terms and Conditions will be binding on the me/us and apply to all my/our transactions with the Supplier; and
- d. Each person signing as Guarantor has received and been given an opportunity to read the Guarantee and Indemnity and has sought independent legal advice prior to execution or waived the opportunity to do so.

Signed by a duly authorised representative of the Customer:

| | |
|---------------------|--|
| Name: | |
| Authority/capacity: | |
| Date: | |
| Signature: | |