

Credit Account Application for: Motion New Zealand Ltd



To be completed by Applicants:

Please email completed form to: accounts@motion.co.nz

Please complete all sections and read the Terms & Conditions of Trade on our website: www.motion.co.nz



Company Details

Legal Name: _____
Trading Name: _____
Postal Address: _____ Post Code: _____
Delivery Address: _____ Post Code: _____
Tel: _____ Fax: _____ Email: _____
 Company Sole Trader Trust Partnership Incorporated Society
NZBN No.: _____ Address of Registered Office: _____
Company No.: _____

Details of Owner (if Sole Trader), Partner (if Partnership), or Director (if Company)

Name: _____ Address: _____
DOB: _____
Name: _____ Address: _____
DOB: _____

Contacts

Purchasing: _____ Tel.: _____ Email: _____
Accounts Payable: _____ Tel.: _____ Email: _____

Trade References

Name: _____ Tel.: _____
Name: _____ Tel.: _____
Name: _____ Tel.: _____

Credit Limit

Please tick applicable: <\$5,000 \$5,001-10,000 \$10,001 - \$20,000 \$20,001 +

I certify that the above information is true and correct and that I am authorised to make this application for credit. I have read and understand the TERMS & CONDITIONS OF TRADE on the website www.motion.co.nz, which forms part of and are intended to be read in conjunction with this Credit Account Application and agree to be bound by these conditions. I authorised the use of my personal information as detailed in the Privacy Act clause therein. I agree that if I am a director or shareholder (owning at least 15% of the shares) of the client, I shall be personally liable for the performance of the Client's obligations under this contract.

Name: _____
Position: _____
Date: _____
Please Sign Here

Office Use Only

Account No.		Date Opened		Check	
Branch				Approval	
ANZSIC		Type		Industry	
Marketing		Category		Industry Sub	
Matrix					