

CREDIT APPLICATION

TAMARIX POULTRY FARM PTY LTD

ABN 26 130 612 021
PO Box 4380, Dandenong South VIC 3164
Ph: (03) 9794 9410

BUSINESS DETAILS

FULL TRADING NAME (Applicant)
REGISTERED COMPANY NAME
ACN / ARBN ABN
BUSINESS ADDRESS STATE POST CODE

DELIVERY ADDRESSES:

ADDRESS ADDRESS
SUBURB SUBURB
STATE POSTCODE STATE POSTCODE

BUSINESS PREMISES Owned Leased Mortgaged Rented
NATURE OF BUSINESS DATE BUSINESS ESTABLISHED
BUSINESS STRUCTURE Sole Trader Private Company Public Company Trust
Partnership Co-operative Incorporated Association Government Authority
PAID UP CAPITAL OF COMPANY NO. OF EMPLOYEES
BANK BRANCH BSB NO. ACCOUNT NO.

TRADING HISTORY

ANNUAL TURNOVER \$ Is the most recent Balance Sheet available for review? YES NO
Are assets of Business encumbered? YES NO AMOUNT \$ TO WHOM
Are bad debts insured? YES NO

CONTACT DETAILS

POSTAL ADDRESS (if different to above) STATE POST CODE
TELEPHONE FAX EMAIL
CONTACT PERSONS - Accounts Telephone:
- Purchasing Telephone:

CREDIT REQUIRED

ESTIMATED AMOUNT OF MONTHLY CREDIT REQUIRED \$

OWNERS' / DIRECTORS' DETAILS

NAME NAME
PRIVATE ADDRESS PRIVATE ADDRESS
PHONE PHONE
DATE OF BIRTH DATE OF BIRTH

INSOLVENCY

Have any of the directors or proprietors been bankrupt or associated with an insolvent company? YES NO
If Yes, NAME YEAR OF BANKRUPTCY / INSOLVENCY

TRADING REFERENCES (Please provide the names, addresses and phone numbers of four (4) current references.)

NAME ADDRESS PHONE
1.
2.
3.
4.

CORPORATE TRUSTEE

Where the Applicant makes this application as a Trustee, it warrants and declares that it has the power and authority to make and execute this Credit Application and that all rights of indemnity which it now has or may have in the future or may otherwise have against the property of the Trust of which it is a Trustee or beneficiary or both, have not been modified or excluded as a result of any act, matter or document made or executed by it or as a result of any breach of fiduciary duty or in any other way. It warrants and declares further that it is has not released and shall not release in the future and shall not cause or permit to be released, lost or diminished in any manner whatsoever, any such rights of indemnity.

NAME OF TRUST DATE OF TRUST DEED
NAME OF TRUSTEE NAME OF SETTLOR
ADDRESS OF TRUSTEE BENEFICIARIES OF TRUST
.....

ACCEPTANCE

The Applicant applies to Tamarix Poultry Farm Pty Ltd (ACN 119 678 545) ("Tamarix") for credit. Tamarix's ABN is 26 130 612 021. The Applicant acknowledges receipt of and accepts the present standard Terms and Conditions and acknowledges that the Terms and Conditions may be changed by Tamarix from time to time.

Where the Applicant makes this application as a trustee, and details of the trust are not provided as above, the below signatories agree to indemnify Tamarix against any loss of money due to Tamarix by the Applicant, unless and until details of the trust are provided.

I/We warrant that I am/we are authorised to sign this Credit Application on behalf of the Applicant.

SIGNATURE SIGNATURE
NAME (Block letters) NAME (Block letters)
POSITION POSITION
DATE DATE

PERSONAL GUARANTEE AND INDEMNITY

I/We note that the trading Terms and Conditions have been provided to us by Tamarix and that I/we have read and understood them. In consideration of Tamarix supplying goods on credit to the Applicant:

I/We (and if more than one, jointly and severally) agree that if the Applicant at any time fails to pay any money due to Tamarix or fails to perform or observe any term or condition of credit or sale to be performed by the Applicant, I/we will forthwith pay to Tamarix all money due and payable by the Applicant (or any subsequent owner of the business name of the Applicant) to Tamarix. No demand by Tamarix for payment shall be necessary.

I/We further agree to indemnify Tamarix against any loss of money due to Tamarix by the Applicant under or relating to any sale by or credit granted by Tamarix to the Applicant (or any subsequent owner of the business name of the Applicant) including expenses and legal costs associated with the collection of outstanding monies and including any loss suffered by Tamarix as a result of the Applicant's failure to perform or observe any term or condition of credit or sale. I/We now charge my/our interest in any real property registered in my/our name/s in favour of Tamarix to secure this Guarantee and Indemnity and authorise the lodgement of a caveat to support this charge.

I/We (and if more than one, jointly and severally) agree that this Guarantee and Indemnity is a continuing Guarantee and Indemnity and will not be invalidated, released or discharged by any event which would or might so invalidate, release or discharge the Guarantee and Indemnity, including (but not limited to) the giving of time, the variation of the terms and conditions of credit or sale, the alteration of the composition of the Applicant or the release of the Applicant or any co-guarantor. I/We understand this Guarantee and Indemnity binds me/us personally.

SIGNATURE SIGNATURE
NAME (Block letters) NAME (Block letters)
WITNESS SIGNATURE WITNESS SIGNATURE
WITNESS NAME (Block letters) WITNESS NAME (Block letters)
DATE DATE

CREDIT CARD DETAILS (FOR C.O.D. CUSTOMERS ONLY)

CARD TYPE: (Visa, Mastercard, Bankcard)
CARD NO:
EXPIRY DATE:/.....
CARDHOLDER'S NAME:

I/We authorise Tamarix until further notice to debit my credit card for amounts due arising from goods delivered on this account.

SIGNATURE: DATE: