

Trading Account Application Form

known as the "Company" hereinafter, wishes to open a trading account with **Chemtools Pty Ltd**

A.B.N. 12 114 400 083. The information supplied on this form is true and correct as at the date below.

The "Company" is aware that Chemtools ships packing slips with the goods and the original invoice is mailed and that Chemtools sends the "Company" a statement of purchases after the end of the month and in turn, the "Company" agrees to settle any outstanding debt due to Chemtools within thirty days net.

If there are any changes to either ownership of the "Company" or any changes to the "Company's" financial status which could affect its ability to repay Chemtools any outstanding debt within the agreed time frame, we (the undersigned) shall personally advise the Managing Director of Chemtools of such matter as soon as possible. If the "Company" fails to repay its debt to Chemtools within the agreed time frame Chemtools reserves the right to repossess such unpaid goods from the "Company".

The "Company" would like to open a Trading Account with Chemtools and we (the undersigned) have read and understood all of the above and will ensure that all the terms and conditions are adhered to.

Authorised Signatory

Name

Position

I have obtained full authorisation to
Sign this application form on behalf of
The "Company".

I have obtained full authorisation to
sign this application form on behalf of
The "Company".

Company Name:

A.B.N. Number:

Company Address:

Delivery Address:

Telephone No:

Fax No:

Email:

Contact Name for Sales:

Position/Title:

Contact Name for Accounts:

Contact Name for Purchasing:

How long have you been operating under this company name?

Years

How long have you been at the above address?

Years

Reference 1 Company Name:

Fax/Email:

Reference 2 Company Name:

Fax/Email:

Reference 3 Company Name:

Fax/Email:

Dated this

day of

(month)