



Stobel Deliveries cc

1 Peddie Road
Wadeville, Ext. 1
elsabe@stobel.co.za



Responsible Care

PO Box 7226
Albemarle
1410

Tel: 011 827-3389
Fax: 011 827-7897

CK88/23539/23

CREDIT APPLICATION FORM

(Please cross appropriate block)

Company Information

Registered name and address: _____

Trading as: _____

For how many years: _____ Registration no: _____

Postal address: _____

Delivery address: _____

Telephone no: _____ Fax no: _____ Website: _____

VAT reference no: _____

Type of concern: Close corporation Company

 Sole proprietor Partnership

Nature of business activities: _____

Credit limit required: _____

(NOTE ACCOUNTS ARE PAYABLE 30 DAYS FROM DATE OF STATEMENT)

Name of Directors: _____

Or

Partner's: _____

Declaration

Have sequestration or liquidation proceedings ever been instituted against the business / directors / partners or owners?

YES NO

Has a compromise ever been offered to creditors?

YES NO

Accounts Person

Name: _____ Surname: _____

Tel: _____ Fax: _____ Email Address: _____

Person to whom quotes must be sent:

Name: _____ Surname: _____

Tel: _____ Fax: _____ Email Address: _____

Banking Details

Auditors: _____

Bank: _____

Branch: _____

Account no: _____

Holding company: _____ (If Applicable) _____

Registered address: _____

Do you own the above trading premises: YES NO

References:

1: Name: _____

 Address: _____

 Tel no: _____

 Contact name: _____

 Average monthly purchases: _____

2: Name: _____

 Address: _____

 Tel no: _____

 Contact name: _____

 Average monthly purchases: _____

3: Name: _____

 Address: _____

 Tel no: _____

 Contact name: _____

 Average monthly purchases: _____

3.

Conditions

I / We certify that I / We are duly authorized to sign this document.

I /We accept the terms of strictly 30 days from date of statement and that interest will be levied on all overdue amounts at the prime bank rate as quoted to Stobel Deliveries cc by their Bankers from time to time.

I/ We accept the trading terms and conditions of Stobel Deliveries, a copy of which is available on request.

I / We agree that should it become necessary for Stobel Deliveries cc to institute legal proceedings against me / ourselves for any overdue amounts, then:

- a) The whole amount outstanding, irrespective of how such amounts may arise, will immediately become due and payable.
- b) All stock in our warehouses will be held by Stobel Deliveries cc until payment in full has been received, and will be sold to recover outstanding debts should these debts be outstanding for more than 90 days.

I/We consent to give 90 days notice for termination of warehousing services provided by Stobel Deliveries cc

I / We consent to the jurisdiction of the Magistrates court for all actions taken against me/us, irrespective of amounts involved and consent to pay attorney and client costs.

Kindly note all goods are stored, transported at owner's risk.

I / We warrant the above information to be true and correct.

Signature: _____

Date: _____

Name (print): _____

Capacity: _____

Company stamp

**Please complete all three pages of this credit application form & fax to:
086 690 6961**