

Kimbriki Environmental Enterprises Pty Limited  
ABN 65 136 789 261  
Kimbriki Road, Terrey Hills NSW 2084  
All correspondence to:  
Locked Bag 6, Terrey Hills NSW 2084  
Ph: (02) 9486 3512 Fax: (02) 9450 1301  
Email: finance@kimbriki.com



## 30 Day Account Application

The customer named below applies for a credit facility with Kimbriki Environmental Enterprises Pty Ltd (KEE) and authorises KEE to allow a commercial credit reporting agency to assess this application and to provide any personal information provided in this application to such agency for that purpose.

Customer's full name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Suburb: \_\_\_\_\_

State: \_\_\_\_\_

Postcode: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Suburb: \_\_\_\_\_

State: \_\_\_\_\_

Postcode: \_\_\_\_\_

Name of Business: \_\_\_\_\_

ABN: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Registered Address: \_\_\_\_\_

Maximum monthly credit amount required: \$ \_\_\_\_\_

Nature of Business or Occupation: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_

Phone No: \_\_\_\_\_

Mobile No: \_\_\_\_\_

Fax No: \_\_\_\_\_

Legal Entity:

- Sole Trader/Partnership  
 Pty/Ltd Company  
 Trust/Nominee Company

ACN \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

ABN \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_

Date Business originally commenced: \_\_\_\_\_

Trading Premises:

- Owned  
 Leased  
 Rented  
 Buying

Date Business commenced under current ownership: \_\_\_\_\_

Bank: \_\_\_\_\_

Bank Address: \_\_\_\_\_

**Names, Titles and Private Addresses of Principals or Proprietors and Directors**

Surname:		
Given Names:		
Position or Title:		
Shares Held:		
Home Telephone No:		
Private Address:		

**This section to be completed by Companies (Ltd & Pty Ltd)**

Date of Incorporation:	Number of Shareholders:	Paid-up Capital:	\$
Approx. Value of Assets: \$	Are the Assets mortgaged? (wholly/partly/unencumbered)		

**This section to be completed by Firms and Partnerships (If not registered, proceed as for 'PRIVATE INDIVIDUALS')**

Total number of partners	Registration No:	Date of Registration
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**This section to be completed by private individuals**

Employer's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb:	State:	Postcode:
Period of employment	Length of time in present home	Is home owned or rented?

If rented, name and address of landlord or agent \_\_\_\_\_

Drivers Licence No: \_\_\_\_\_

**PLEASE LIST ALL PERMANENT VEHICLE REGISTRATION NUMBERS AUTHORISED TO USE ACCOUNT**


**BUSINESS REFERENCES (firms providing goods or services to you on credit)**

Full Name	Suburb	Telephone #	Fax #

**CONDITIONS OF CREDIT IF APPLICATION APPROVED**

In consideration of the credit facility being granted to the customer by KEE, the customer agrees:

- To pay for all services provided to its business by KEE together with applicable GST within 30 days of the end of the month in which the invoice was issued.
- To provide details to KEE immediately of any changes of the names, addresses, contact numbers and authorised vehicles specified in this application.
- To pay interest to KEE at the rate of 10% per annum on daily balances of all overdue amounts. Interest shall be paid from the due date up to and including the date of actual payment together with an administration fee of \$55 incl. GST.
- To provide a cash security bond in an amount determined by KEE (but being not less than \$2,000). This bond must be paid to KEE before the credit facility may be used.  
BSB : 062208    ACCOUNT NO.: 10162620
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- That the person(s) (if more than one, jointly and severally) signing this application is/are personally liable for all money owing by the Customer if the Customer fails to pay KEE within 30 day trading terms.
- That GST will be payable by the Customer in respect of any fee for services provided by KEE.
- That for the purposes of the Privacy Act 1988 (C'wealth) any information provided in this application may be disclosed to any person for the purposes of assessing this application and recovering any money which may be payable to KEE by either the Customer or any signatory to this application.
- That the signatory(ies) below is/are authorised by the Customer to make this application on its behalf and to enter into the agreements in this section of the application.

Date of application: \_\_\_\_\_

Signatory(ies):

Name	Position	Signature

**OFFICE USE ONLY**

- |  |  |
|--|--|
| <input type="checkbox"/> MASTER ACCOUNT LIST | <input type="checkbox"/> W/M CUSTOMER      |
| <input type="checkbox"/> W/M VEHICLE         | <input type="checkbox"/> W/M 2G ACCOUNTS   |
| <input type="checkbox"/> VEHICLE FAX OUT     | <input type="checkbox"/> NOTIFIED CUSTOMER |
| <input type="checkbox"/> BOND RECEIVED       |  |