

# AERO IMAGES

A Division of Inside Edge Marketing Pty Ltd (ABN 20 061 073 407) of Australia

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(to call or fax us from overseas, use your overseas dialing code and replace the first "0" with "61")

## CREDIT APPLICATION

### Business Details:

Trading Name: \_\_\_\_\_ Date: \_\_\_\_\_

Business Entity:  Sole Proprietorship  Partnership  Registered Company

Entity Name &:

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

Australian Business Number (ABN) \_\_\_\_\_ (or other Business Registration #)

Trading Address: \_\_\_\_\_ Years There: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

### Owner(s) / Director(s) Details:

Name: \_\_\_\_\_ Private Phone: \_\_\_\_\_

Private Address: \_\_\_\_\_ Drivers Lic. # \_\_\_\_\_

Name: \_\_\_\_\_ Private Phone: \_\_\_\_\_

Private Address: \_\_\_\_\_ Drivers Lic. # \_\_\_\_\_

### Trade References (three references must be supplied):

Name: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Name: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Name: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

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

**This information is correct to the best of my / our knowledge. It has been supplied to be used to determine the amount & conditions of credit to be extended, and I / we consent to Aero Images obtaining information from the referees for this purpose. Should we fail to pay any accounts by their due date, we consent to our details being supplied to industry watchlists (including but not limited to The O/D List) and by them to other wholesalers.**

Signed: \_\_\_\_\_ Name: \_\_\_\_\_ Position: \_\_\_\_\_

### Personal Guarantee(s) of Owners / Partners / Directors:

**I / We understand Aero Images' trading terms as explained. I / We guarantee payment of any and all accounts for goods purchased by the above entity together with any legal or out-of-pocket expenses associated with the collection of any outstanding amounts. I / We understand this guarantee binds me / us personally.**

Signed: \_\_\_\_\_ Name: \_\_\_\_\_ Position: \_\_\_\_\_

Witnessed By: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Name: \_\_\_\_\_ Position: \_\_\_\_\_

Witnessed By: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_