



Accounts/Credit Department
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CREDIT APPLICATION
A.B.N. 63 564 950 452

THIS APPLICATION IS FOR A CREDIT ACCOUNT TO BE PROVIDED BY ROSEWOOD WINES PTY LTD, ("BARNY'S FINE WINES & ALES"),
 AND THE APPLICANT WHOSE DETAILS APPEAR BELOW.

Business Details

The Applicant(s) Business/Trading Name: _____
 Registered Company Name (if applicable): _____
 A.B.N.: _____ A.C.N.: _____ Bus. Registration No.: _____
 Billing Address: _____
 Suburb: _____ State: _____ Post Code: _____
 Shipping Address: _____
 Suburb: _____ State: _____ Post Code: _____
 Telephone No.: _____ Fax No.: _____
 Email: _____ Website: _____

Corporate Structure

(tick appropriate)

Proprietary Company Public Company Incorporated Body Trustee Sole Trader Partnership

Applicants Financial Details

Business Premises: Owned Leased Date Business Commenced: ____/____/____
 Bank: _____ Branch: _____ Telephone: (____) _____

Credit Account Details

Type of Account: Credit COD Monthly Credit Applied For: \$ _____

Terms: 7 day (from invoice) 30 day (from EOM) Other

Credit Card Details:

Card Type: American Express MasterCard Visa

Card No.: _____ - _____ - _____ - _____ exp: ____/____ C.c.v No.: _____

Disclaimer:

I hereby provide and authorise the use of my credit card details (noted above) to Rosewood Wines Pty Ltd trading as Barny's Fine Wines & Ales for the purpose of processing COD/Prepaid orders and to keep record of these details for future use. This charge does not apply to prepaid or COD orders. This credit card will be charged in the event that the account has invoices 14 days in arrears.

Signed: _____ Full Name on Card (print): _____

Trade/Business References

The Applicant must be a **credit** customer of these referees and must supply all details.

<u>Company Name:</u>	<u>Fax:</u>	<u>Telephone:</u>
1. _____	(____) _____	(____) _____
2. _____	(____) _____	(____) _____
3. _____	(____) _____	(____) _____

***All Trade references requested or supplied must be done in writing via fax. If details of Trade references are omitted, Credit may be conditional or even refused.**

Proprietors/Owners

Name(1): _____	Date of Birth(1): _____
Address(1): _____	Drivers Licence No.(1): _____
Name(2): _____	Date of Birth(2): _____
Address(2): _____	Drivers Licence No.(2): _____