

## **TITAN TRADE CENTRE**

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CREDIT APPLICATION FOR A BUSINESS ACCOUNT			
BUSINESS CONTACT INFORMATION			
Company name:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:		State:	Post Code:
Date business commence	ed:		I
ABN:		ACN:	
Sole proprietorship:	Partnership:	Corporation:	Other:
•		EDIT INFORMATION	
Primary business address:			
City:		State:	Post Code:
Telephone:	Fax:	E-mail:	
Bank name:			
Bank address:		Phone:	
City:		State:	Post Code:
Credit amount request			1
Total Asset			
Total Liability			
Annual Turnover			
BUSINESS/TRADE REFERENCES			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Contact Person:			
Company name:			
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Contact Person:			
AGREEMENT			
1. By submitting this application, you authorize Titan Trade Centre to make inquiries into the banking and business/trade references that you have supplied.			
2. By submitting this application, you accept Titan Trade Centre Standard Trading Terms & Conditions.			
SIGNATURES			
Title:		Title:	
Date:		Date:	