

NOW YOU'RE COOKING WITH



DEALER APPLICATION FORM

NAME _____

TRADING AS _____

BUSINESS ADDRESS _____ TEL. # _____

HOME ADDRESS _____ TEL. # _____

TYPE OF BUSINESS _____ NO. OF YEARS _____

TYPES OF PRODUCTS/SERVICES _____

DATE BUSINESS STARTED _____

BUSINESS/PREMISES OWNED/RENTED/LEASED _____

IF BUSINESS IS A PARTNERSHIP, LIST FULL NAMES OF PARTNERS

IF BUSINESS IS A LIMITED LIABILITY COMPANY, LIST FULL NAMES

OF DIRECTORS _____

NAME OF AUDITORS/ACCOUNTANTS _____

REFERENCES – BANK _____

BUSINESS (1) _____

(2) _____

(3) _____

AUTHORISED COMPANY SIGNATURES:

<u>TITLE</u>	<u>NAME</u>	<u>SIGNATURE</u>
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1.

2.

3.

CURRENTLY TRADING:

YES

NO

APPLICANT'S CERTIFICATION:

I/WE THE UNDERSIGNED CERTIFY THAT THE ABOVE IS TRUE AND
HEREBY AUTHORISE ANY FURTHER INVESTIGATION TO THE
INFORMATION GIVEN.

SIGNATURE

DATE

SIGNATURE

DATE

FOR COMPANY USE ONLY:

MARKETING REP'S COMMENTS: _____

SIGNATURE

DATE

CREDIT CHECK DONE YES NO

APPLICANT CREDIT WORTHY YES NO

CREDIT RECOMMENDED YES NO

CREDIT TERMS _____

CREDIT LIMIT _____

AUTHORIZATION

DATE