



Filtration & Purification Specialists

Blue H₂O Filtration Pty Ltd

ABN: 98 394 312 823

ACN: 103 763 293

Unit 1, 11-13 Wells Road, Oakleigh, Victoria 3166

Phone: (03) 9564 7029 Fax: (03) 9564 7039

Web: www.bhftechnologies.com.au

Email: info@blueh2o.com.au

APPLICATION FOR CREDIT ACCOUNT

Please complete, sign and fax reply to Blue H₂O Filtration Pty. Ltd – Fax No. (03) 9564 7039

Please be advised of our company details:

Blue H₂O Filtration Pty Ltd

ABN: 98 394 312 823

ACN: 103 763 293

Unit 1, 11-13 Wells Road, Oakleigh, Victoria 3166

Phone: (03) 9564 7029

Fax: (03) 9564 7039

Web: www.bhftechnologies.com.au

Email: info@blueh2o.com.au

Customers wanting to make direct payment, our bank account details are:

National Australia Bank, Collins Street, Melbourne

Account BSB: 083 166

Account Number: 55656 8697

We look forward to working closely with you on your filtration applications.

If you have any queries please contact our office (03) 9564 7029

APPLICATION FOR CREDIT ACCOUNT

TRADING TERMS: STRICTLY NETT 30 DAYS FROM DATE OF INVOICE

A. COMPANY NAME: _____
 TRADE NAME: _____
 A.C.N. (Aust. Co. only): _____
 A.B.N.: _____
 REGISTERED OFFICE: _____
 BUSINESS ADDRESS: _____
 POSTAL ADDRESS: _____
 TELEPHONE NO: () _____ FAX NO: () _____
 EMAIL _____

B. NATURE OF BUSINESS: _____

C. NAMES, ADDRESSES & TELEPHONE NUMBERS OF ALL DIRECTORS, PARTNERS & CHIEF EXECUTIVES:

1. _____

2. _____

3. _____

D. DATE AND REGISTRATION OF COMPANY OR PARTNERSHIP: _____

E. PAID UP CAPITAL \$ _____

F. NAME, ADDRESS AND TELEPHONE NUMBERS OF BANK:

TRADING PERIOD WITH BANK: _____

G. THREE CURRENT TRADE REFERENCES: (Freight and utilities suppliers excluded)

1. COMPANY _____	Tel No: () _____
	Fax No: () _____
2. COMPANY _____	Tel No: () _____
	Fax No: () _____
3. COMPANY _____	Tel No: () _____
	Fax No: () _____



APPLICATION FOR CREDIT ACCOUNT (continued)

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H. IS PROPERTY OWNED OR LEASED? _____

I. LEASE PERIOD: _____

LANDLORD/AGENT – NAME & ADDRESS: _____

CONTACT NAME: _____ TEL NO: () _____

J. APPROXIMATE CREDIT AMOUNT REQUIRED (per month): \$ _____

DECLARATION

I/WE DECLARE THAT THE ABOVE INFORMATION IS ACCURATE AND AGREE TO ABIDE BY THE CONDITION OF SALE. I AUTHORISE BLUE H2O FILTRATION PTY LTD TO OBTAIN FINANCIAL INFORMATION OF OUR COMPANY FROM OTHER ORGANISATIONS.

APPLICANT'S SIGNATURE: _____

APPLICANT'S NAME: _____

POSITION: _____ DATE: _____

PS. BLUE H2O FILTRATION PTY LTD WILL INFORM ALL APPLICANTS OF IT'S DECISION WITHIN A FEW DAYS. THE AMOUNT TO BE AUTHORISED FOR CREDIT IS ENTIRELY UP TO THE DISCRETION OF BLUE H2O FILTRATION PTY LTD.

OFFICE USE ONLY

ACCOUNTS DEPT TO CHECK:

G. THREE CURRENT TRADE REFERENCES:

1. COMPANY: _____

2. COMPANY: _____

3. COMPANY: _____

TCI CHECK: _____

APPLICATION APPROVED: _____ DATE: _____ LIMIT \$ _____

OTHER REMARKS: _____