

# TAKE AWAY BINS

ABN 18 727 953 159

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GUMDALE Q. 4154  
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## APPLICATION FOR 30 DAY CREDIT ACCOUNT

COMPANY NAME:	A C N	
REGISTERED TRADING NAME:	A B N	
REGISTERED OFFICE:	P/CODE	
TRADING ADDRESS:	P/CODE	
POSTAL ADDRESS:	P/CODE	
PHONE:	FAX:	MOBILE:
EMAIL ADDRESS:		
YEARS TRADING:	LESS THAN 3-PREVIOUS BUSINESS	
NATURE OF BUSINESS:		
CONTACT PERSON:	ACCOUNTS CONTACT	
<b>DETAILS OF DIRECTORS, PROPRIETORS, PARTNERS</b>		
NAME	PRIVATE ADDRESS	A/H PHONE
1.		
2.		
3.		
BANK:	BRANCH:	
I/We the above named Directors / Proprietors / Partners hereby agree to abide by Trading Terms as follows:  <ol style="list-style-type: none"><li>1. Rubbish must NOT exceed the lip of the rim of the Bin</li><li>2. There must be NO obstruction in the way of the Bin on collection</li><li>3. All Asbestos Bins must be located inside the property</li><li>4. Payment must be made within 30 days of EOM</li><li>5. Bins must be swapped or collected no later than 3 weeks from delivery date</li></ol>		
NAME:	SIGNATURE	DATE:
NAME:	SIGNATURE	DATE:
NAME:	SIGNATURE	DATE: