**Credit application form**

 **Personal details**

(to be completed by all applicants)

**\*Surname:**

**\*First name:**

**\*Title:**

Day

Month

Year

**\* Home address:**

**\*Telephone no:**

**Work:**

**Mobile:**

**\* Duration at current address:**  0-6 months

* 6-18 months  18-36 months
* over 36 months

**\*Previous address:**

(if less than 3 years at current

address)

**Classes:**  1

 3

 4

 6

 2

 5

**Driver licence no:**

**\* Bank account no:**

 **Employment details**

**Applicant’s employer:**

**Postal address:**

**Business phone no:**

**Position held:**

**Length of service:**

Years

Months

**Previous employer:**

**Postal address:**

**Business phone no:**

**Email address:**

**Position held:**

**Length of service:**

Years

Months

 **Self employed details**

(if applicable)

**Business name:**

**Nature of business:**

**Physical address:**

**Mailing address:**

**Business phone no:**

**Name of accountant:**

**Mailing address:**

(

)

**Contact name:**

**Contact phone:**

**Bank account no:**

Fields marked with an \* are compulsory

**Please sign the Declaration on page 3**

**Credit application form**

**page 1**

**03/10**

**GST no:**

( ) **Email address:**

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**Email address:**

( )

( )

( )

**\* Middle name:**

* Mr  Mrs  Miss  Ms  Other **\* Date of birth:**

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 **Company details**

(only to be completed by Limited Liability Companies)

**\*Company name:**

**\*Trading as:**

**Nature of company:**

**\*Registered address:**

**Physical address:**

**Mailing address:**

**\*Business phone no:**

**\*Contact name:**

**\*Bank account no:**

**Name of accountant:**

**Mailing address:**

**Contact name:**

**(Specify all directors) Directors:**

**\*Full name:**

**\*Home address:**

**Telephone no:**

**Work:**

**Mobile:**

**Directors:**

**\* Full name:**

**\* Home address:**

**Telephone no:**

**Work:**

**Mobile:**

**Directors:**

**\*Full name:**

**\* Home address:**

**Telephone no:**

**Work:**

**Mobile:**

**Directors:**

**\*Full name:**

**\* Home address:**

**Telephone no:**

**Work:**

**Mobile:**

**If additional Directors attach details to application form**

Fields marked with an **\*** are compulsory

**Please sign the Declaration on page 3**

**Credit application form**

**page 2**

**03/10**

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**\* Date of birth:**

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**\* Date of birth:**

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**\*Date of birth:**

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**\*Date of birth:**

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**\*Contact position:**

**Contact phone:**

( )

**\*Company no:**

**\*GST no:**

( ) **Email address:**

 **Terms and conditions**

**Declaration:**

The customer agrees to abide by the standard Terms and Conditions of trade as set out below, including those contained in the direct debit application and authority forms. The customer ackonwledges by signing this application, that they have read and understood the terms and conditions of trade.

**Customer information:**

I/We authorise any person or company to provide the NZ Transport Agency (NZTA) with such information as the NZTA may require in response to any credit enquiries they may wish to undertake. I/We further authorise the NZTA to furnish any third party details of this application and

any subsequent dealings that I/we may have with you as a result of this application being actioned. (Information collected on this form may be supplied to a credit reporter or reporters, to assist us with making a decision on the grant of credit and/or for the purpose of debt collection).

**Interest:**

Failure to pay any account by the due date specified in the Direct Debit Authority, the customer could pay interest on the balance oustanding as per section 21A of the Road User Charges Act 1977, of up to a rate of 10% per annum.

**Third party costs:**

The customer shall pay or reimburse all costs and/or expenses incurred by the NZTA in instructing our Collection Agencies to recover any amount overdue for payment as per the court rules under civil legislation.

**Applicant signature:**

**\*Name:**

**Signature:**

**Date:**

I confirm that I am authorised to give approval.

**Witnessed by:**

**\* Name:**

**Signature:**

**Date:**

 **Personal guarantee**

**(for Limited Liability Companies)**

**I/We** (name of guarantor)**:**

**Occupation:**

**of** (guarantor’s address)**:**

**request the NZTA to allow** (account holder)**:**

or any company or partnership formed in amalgamation or reconstruction thereof (hereinafter called together with his/its successors and administrators and assigns referred to as “The Customer”) to facilitate the future supply of goods and services including the provision of credit and as consideration thereof I/we do hereby jointly and severally guarantee the due and punctual payment of all monies which have become payable or shall become payable in the future to the NZTA in any manner by the account holder. In the event that further goods, services or credit are not provided from the date of this guarantee, I/we acknowledge that it shall be deemed and agreed as between the parties that this guarantee is given in consideration of a forbearance to sue on the part of the credit provider, the customer in respect of any monies owing.

**Dated this**

**day of**

**20**

**Signed by:**

**Name:**

as guarantor in the presence of:

**Witness:**

**Occupation:**

**Address:**

Fields marked with an \* are compulsory

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