

New Zealand Panels GROUP

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New Zealand Panels Group Limited Application for a Trade Credit Account

This Application applies to New Zealand Panels Group Limited and any of its companies or divisions ("the Group") with whom the Customer does business from time to time.

NZ Panels Group Business Unit: _____ NZ Panels Group Sales Representative: _____

Companies to complete below

The personal guarantee attached is to be completed for all applications

Company Name: _____

Trading Name: _____

Registered Office Address: _____

Company number: _____

Sole Traders /Partnerships/Trusts/Other to complete below

Trading Name: _____

Details of Individual/Partners/Trustee /Other

Please state your full name as appears on official documents

1. Full name : _____

Address: _____

Date of Birth: ____/____/____

Please attach a photo id with signature (Drivers licence or Passport)

2. Full name : _____

Address: _____

Date of Birth: ____/____/____

Please attach a photo id with signature (Drivers licence or Passport)

3. Full name : _____

Address: _____

Date of Birth: ____/____/____

Please attach a photo id with signature (Drivers licence or Passport)

All applicants to complete below:

Postal Address _____ Post Code _____

Street Address _____

Delivery Address _____

Telephone: Business _____ Mobile: _____

Facsimile: _____ E-mail: _____

Accounts Payable Contact: _____ Bank: _____ Branch: _____

Invoice/Statements email address: _____

Order confirmations email address: _____

Estimated Monthly Purchases \$ _____ Will PO forms be sent with your order? (Circle): YES or NO

Nature of business: _____ Business premises (circle): OWNED / LEASED/ HOME BASED

Number of employees: _____ Number of years in business: _____

Previous Trading name (if any): _____

Name of Buying Group you are part of: _____

All applicants to complete below: (continued)

Trade references from businesses you currently operate or have operated a Trade Account with:

(Please state three. Personal references, utility companies and petrol stations are not applicable) PHONE No. (Include area code)

1. _____ () _____
2. _____ () _____
3. _____ () _____

EACH PARTNER/TRUSTEE TO SIGN THE AUTHORISATION BELOW

PRIVACY ACT:

The Group may not be able to process this application unless all of the information requested is provided. From time to time, the Group may use information it collects and holds for purposes relating to the operation of the credit account, the provision of credit, credit assessment and debt recovery (including collecting information from and disclosing information to, credit reporting agencies, debt collection agencies, trade referees and other third parties), to register any security interest and for marketing. The Group may also collect information from, and disclose information to, other businesses in the Group for the same purposes. Information disclosed to credit reporting agencies will be held and used by such agencies to provide credit reporting services (including supplying the information to other customers who use their services). Under the Privacy Act 1993, individuals have rights of access to, and correction of, their personal information.

AUTHORISATION:

The Customer and each of the individuals named below authorises the Group to collect information from any person or entity for any of the above purposes, and for such person or entity to disclose information to the Group, and also authorises the Group to disclose information to any person or entity for any of the above purposes and for such person or entity to collect information from the Group. The Customer and each of the individuals named below confirm that the information it has provided to the Group is true and correct.

The Customer acknowledges that the Conditions of Sale attached have been read and understood and agrees to comply with them.

To be signed by the Customer named above (by the sole trader, each partner, an authorised signatory of company, each trustee or an authorised signatory of government or other entity).

SIGNATURE OF THE CUSTOMER _____

FULL NAME OF SIGNATORY _____

TITLE _____ DATE _____

SIGNATURE OF THE CUSTOMER _____

FULL NAME OF SIGNATORY _____

TITLE _____ DATE _____

SIGNATURE OF THE CUSTOMER _____

FULL NAME OF SIGNATORY _____

TITLE _____ DATE _____

To be signed by at least 2 directors, as individuals. (It is not necessary for directors to sign if a company is publicly listed or a subsidiary of a publicly listed company.)

SIGNATURE OF DIRECTOR _____ DATE _____

FULL NAME _____

CURRENT ADDRESS _____

SIGNATURE OF DIRECTOR _____ DATE _____

FULL NAME _____

CURRENT ADDRESS _____

PERSONAL GUARANTEE**A personal guarantee is to be completed for all applications**

TO: Any member of the New Zealand Panels Group with whom the Customer wishes to do business from time to time and to that person's successors and assigns ("the Group")

I (Personal Name) _____

OF (Address) _____

IN CONSIDERATION of the Group at my request, supplying and agreeing to continue to supply materials and other goods and services and to make advances on the terms of the attached or accompanying Application for a Trade Credit Account and Conditions of Trade to:

(Company Name of Customer) _____

("the principal debtor") I HEREBY UNCONDITIONALLY AND IRREVOCABLY GUARANTEE to you due payment of all moneys owing by, and performance of all other obligations of, the principal debtor to you from time to time AND indemnify you against any losses incurred by you as a result of its failure to make those payments and perform those obligations AND I also agree that:

1. THIS guarantee is a continuing guarantee and indemnity, is in addition to any other guarantee or security held by you at any time, and may be enforced without you first having taken steps against the principal debtor, any other person or under any other guarantee or security.
2. NO amendment of any document or granting of credit, extension of former credit or granting of time to the principal debtor and no waiver, indulgence or neglect to sue on your part not the release of any securities held by you nor the liquidation of the principal debtor not any other matter or thing whatsoever which could operate to impair, or discharge my liability shall affect my liability to you under this guarantee and indemnity and as between you and me I am deemed to be a principal debtor and am liable to you accordingly. If I am a guarantor of the principal debtor with anyone else their failure to sign this and any parallel guarantee and indemnity will not affect my liability.
3. THIS guarantee and indemnity continues in force notwithstanding that the principal debtor's account with you may from time to time be in credit.
4. WITHIN 7 days from my receipt of notice in writing of any default on the part of the principal debtor I agree to make payment to you of all sums relating to that default.
5. I have read the "Privacy Act" clause which is part of the Application for a Trade Credit Account and in respect of myself give authority set out in the Authorisation clause. .
6. I also agree that you have the right to complete and register a mortgage or a caveat over any property owned by me to secure my obligations under this guarantee and indemnity I now irrevocably appoint you as my grantor and attorney for those purposes.

DATED at _____ on _____ 20 _____

EXECUTED as a deed by the Guarantor

Guarantor Signature _____

In the presence of (Witness) _____

Occupation _____

(Witness) FULL NAME (print) _____

(Witness) Address _____

Individual Personal Guarantees forms are to be completed if more than one guarantee in place

THIS SECTION FOR OFFICE USE ONLY**Credit Management**

All credit references must be checked and a signed authorisation by the Credit Manager recorded before a credit account can be opened.

	(Circle)		Comments
Trade References Attached:	YES	NO	_____
Credit Bureau reference attached:	YES	NO	_____
Credit Controller's report attached:	YES	NO	_____
Rep's/Managers recommendation attached:	YES	NO	_____
Personal Guarantee Signed (companies)	YES	NO	_____
PPSR checked for existing securities	YES	NO	_____
ID attached (sole traders, partnerships, trusts)	YES	NO	_____
Conditions of Sale signed	YES	NO	_____

Trade References

1 _____

2 _____

3 _____

Business Unit Account Numbers

Arno_____	Impeys_____
Anthony Shearer_____	Kopine_____
Bestwood_____	Prime Panels_____
Dezignatek_____	

Credit Manager Signature: _____

APPROVED ☐**DECLINED** ☐Register on PPSR: YES ☐ NO ☐

PPSR expiry date: _____

INITIAL LIMIT: \$ _____

Credit Terms: _____

Date Opened: ____/____/____

Notes _____
