



Account Application Form

DETAILS OF RESPONDENT ENTITY REQUESTING TRADE ACCOUNT:

Entity Type: Sole Trader Company Partnership Trust

Registered Name: _____

ABN / ACN: _____

Date of Incorporation: _____

Registered Office Address: _____

State: _____ Postcode: _____

Physical Address: _____

State: _____ Postcode: _____

Postal Address: _____

State: _____ Postcode: _____

Accounts Payable Contact: _____

Phone Number: _____

Accounts Email: _____

DETAILS OF DIRECTORS (If Company) OR OWNER (If Sole Trader) OR PARTNERS (If Partnership) OR TRUSTEE (If a Trust):

Full Name: _____	Full Name: _____
Home Address: _____	Home Address: _____
Contact No.: _____	Contact No.: _____
Email: _____	Email: _____

TRADE REFERENCES:

Business Name: _____	Business Name: _____
Supplier No.: _____	Supplier No.: _____
Contact: _____	Contact: _____
Phone: _____	Phone: _____
Email: _____	Email: _____

PAYMENT TERMS: STRICTLY 30 DAYS FROM INVOICE DATE
UNLESS OTHERWISE AGREED

DECLARATION AND AGREEMENT

I declare that:

- I, on behalf of the Respondent Entity, am hereby requesting a Trade Account with Lab 247 Pty Ltd.
- I consent to Lab 247 Pty Ltd contacting our accountant and the trade references provided to obtain additional information as and if required, in relation to the establishment of a trading account with Lab 247 Pty Ltd.
- I have not been convicted for fraud or a fraud-related offence, or, where the Respondent Entity is a company, the Directors have not been convicted for fraud or a fraud-related offence.
- I have not been a bankrupt or a Director of a company that has entered into a Deed of Company Arrangement, been placed into External Administration or into Liquidation, or, where the Respondent Entity is a company, the Directors have not been a bankrupt or a Director of a company that has entered into a Deed of Company Arrangement, been placed into External Administration or into Liquidation.
- Have read, understood and as an Authorised Representative of the Respondent Entity, agree on behalf of the Respondent Entity to be bound by Lab 247 Terms and Conditions of Engagement.
- I am authorised to make this application and declaration on behalf of the Respondent Entity.

Signature of Authorised Representative

Printed Name

Respondent Entity (Company Name)

Position

Date

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UNLESS OTHERWISE AGREED

PERSONAL GUARANTEE & PRIVACY AGREEMENT

I / We undersigned representative(s) of the applicant, having requested the vendor Lab 247 Pty Ltd to extend credit to the applicant, and in consideration of the granting of such credit, do hereby jointly and severally unconditionally guarantee payment of all moneys payable to the vendor by the applicant, and the vendor shall be at liberty to regard each of us in all respects as a principal debtor, and the vendor shall not be obliged to take action first against the applicant, and we do each jointly and severally charge our real and personal property with any indebtedness which may arise under the terms and conditions of this guarantee.

APPLICANT: _____
(Name of Company or Entity Requesting Trade Account with Clearsafe)

PERSONAL GUARANTEE:

IN WITNESS WHEREOF we have executed these presents

Signed: _____ Name: _____ Date: _____
(Signature of Guarantor)

IN THE PRESENCE OF:

Signed: _____ Name: _____ Date: _____
(Witness Signature)

Please return completed form to:

Lab 247 Pty Ltd
2/9 Industrial Road
Unanderra NSW 2526

Or by email to:

Email: accounts@lab247.au

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