



**GRUMPY BAKER NEW CUSTOMER APPLICATION FORM**

Once completed please return to address attached or **fax to: 02 9560 8366.**

(All sections must be completed in full)

REGISTERED BUSINESS NAME .....

TRADING AS ..... ABN .....

CONTACT NAME(s):.....

POSITION:.....

BUSINESS TEL. NO. .... FAX .....

EMERGENCY NO/s:.....

EMAIL:.....

DELIVERY ADDRESS .....

.....POSTCODE:.....

OPENING TIME .....

DELIVERY INSTRUCTIONS .....

DATE OF 1<sup>st</sup> ORDER:.....

**(NB: we suggest placing a standard order that can be amended or modified when required)**

PROPRIETORS/DIRECTORS/PARTNERS FULL NAMES:.....

.....

RESIDENTIAL ADDRESS:.....

.....PHONE:.....POSTCODE.....

BANK:.....BRANCH:.....

.....

ACCOUNTANT:.....PHONE:.....

HOW LONG HAS BUSINESS BEEN TRADING?:.....

CURRENT BUSINESS/TRADE REFERENCES:

**1) Business:**.....**Contact:**.....**Phone**.....

**2) Business**.....**Contact**.....**Phone**.....

**3) PROPOSED PAYMENT TERM - payment terms are COD or seven (7) day account - pls circle one**

In signing this document, I/we acknowledge that I/we have read the terms and conditions attached and undertake to trade in accordance with them. Orders may be stopped at any time if payments in full are not received according to nominated terms. Any cost incurred to retrieve funds will be at the expense of debtor.

**SIGNED** .....

**NAME:**.....**DATE:**.....