

APPLICATION TO OPEN A TRADING ACCOUNT



You have made a request to open a trading account with us. Before we can open an account we need you to:

1. Complete all sections on this Application Form
2. Provide three trade references (i.e. suppliers you currently use who can attest to your credit history)
3. Initial the first page of the attached Terms of Sale document in the space provided, then sign your acceptance of the terms on the second page.
4. Return your completed Application Form and Terms of Sale document to our Administration Team at PO Box 7482 Christchurch or fax to 03 377 5240

Once your application is approved we will let you know your account is open and provide you with information about your account. Thank you for choosing to trade with us.

If you have any queries regarding your application or your account you can contact the Administration Team by calling 03 3772773 or sending an email to admin@en-equip.co.nz.

DETAILS OF COMPANY OR TRADING ENTITY

Full Legal Name - <i>The "Applicant"</i>			
Trading As - <i>If different to above</i>			
Delivery Address			
Billing Address			
Registered Office			
Phone		Fax	
Organisation Type:	Please Tick One	<input type="checkbox"/> Limited Company	<input type="checkbox"/> Partnership <input type="checkbox"/> Sole Trader
Date Established		Do you have more than 1 branch?	<input type="checkbox"/> Yes <input type="checkbox"/> No

TYPE OF BUSINESS

Please select the main type of business your company engages in from the list on the left. Record your selections in the boxes on the right.

- Automation & Control
- Boiler/Combustion
- Control Systems
- Electrical
- HVAC (Commercial)
- HVAC (Residential)
- Industrial & Manufacturing
- Original Equipment Manufacturer (OEM)
- Plumbing
- Refrigeration
- Solar Heating
- Underfloor heating
- Other (Please specify)

Main Business Type 1

Other Business Type 2

Other Business Type 3



OWNERS AND/OR DIRECTORS

Name	Address	After Hours Phone	Mobile Phone

YOUR PURCHASING & BILLING PREFERENCES

Credit Limit Requested	_____ <i>per month</i>
Purchase Order	Do you require a purchase order on all of your orders? <input type="checkbox"/> Yes <input type="checkbox"/> No
Invoices & Statements	Would you prefer to receive your invoices and statements by e-mail? <input type="checkbox"/> Yes <input type="checkbox"/> No

ORGANISATION CONTACTS

Role	Name	Email Address
Manager		
Accounts		
Purchasing		
Other Contact		
<i>Please Specify</i>		
Other Contact		
<i>Please Specify.....</i>		

TRADE REFERENCES

Company	Address	Phone Number

CONSENT TO COLLECT INFORMATION

The Applicant consents to the Supplier:

- collecting information for the purpose of this application,
- retaining information for as long as the Supplier reasonably deems necessary,
- contacting the Trade References to verify any information contained in this form and
- to make reasonable enquiry concerning the Customer as is relevant to the Supplier and this application.

CONSENT TO RECEIVE INFORMATION BY E-MAIL

Under the provisions of the Unsolicited Electronic Messages Act 2007 we need to obtain your consent to send relevant information such as product updates, product releases, specials, latest news etc to you by email.

Do you consent to us forwarding information of this nature to you electronically **Yes** **No**

CONFIRMATION OF DETAILS IN APPLICATION

I confirm that the information contained in this application is true and correct and that if this application is accepted we will abide by the Company's Terms and Conditions of Sale as attached to this application.

Applicant 's Name _____ Title _____
 Authorised Signature _____ Date _____

Remember to sign the attached Terms and Conditions of Sale document and return with this Application Form to en-equip at PO Box 7482, Christchurch.