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www.camelspace.com

application for credit with camelspace limited

A This account is being opened by ("The Client"):
(SELECT ONE)

<input type="radio"/> Company	<input type="radio"/> Individual/ Sole Trader (MUST ATTACH A COPY OF A DRIVERS LICENCE/PASSPORT)	<input type="radio"/> Trust	<input type="radio"/> Partnership	<input type="radio"/> Body Corporate ("BC")	<input type="radio"/> Other (PLEASE SPECIFY I.E. CHARITY, SCHOOL, INCORPORATED SOCIETY)
Date established:	/ /	/ /	/ /	/ /	/ /
Client entity number:				(ONLY LIMITED LIABILITY PARTNERSHIPS)	Type: No.:
Client's full legal name:					
Client's trading name: (IF DIFFERENT FROM ABOVE)				Client's main telephone:	
Client's physical address:					
Client's main enquiry email address:				GST number:	
Client's postal address:					

B Would you prefer traditional tax invoices or CCA cumulative payment claims?
(IF YOU ARE UNSURE WHAT A CUMULATIVE CCA PAYMENT CLAIM IS, SELECT INVOICE)

<input type="radio"/> Invoice	Do you require order numbers on invoices/claims? (CIRCLE)	Y N	Today's date: / /
<input type="radio"/> Claim			

C Please provide an estimate of the approximate value of your first job/spend with us (labour + transport + one months rent):
(ASK YOUR CAMELSPACE BUSINESS DEVELOPMENT MANAGER/ESTIMATOR IF YOU ARE UNSURE)

\$ _____

D Accounts payable contact's details

Email address for invoices/claims and statements:		
Name:	Telephone:	
Email:		
Trade reference details	1	2
Name:		
Email:		
Telephone:		

E

All Director's, Partner's, Trustee's (except independent trustees), Individual (Sole Trader)'s details (if more than two, complete and attach as many addendum sheets (blank attached) as required) or Body Corporate Secretary:

Director / Partner / Trustee / Individual / Other / BC Chairperson ①		Director / Partner / Trustee / Individual / Other ②	
Full name:		Full name:	
Home address:		Home address:	
Mobile number:		Mobile number:	
Date of birth:	/ /	Date of birth:	/ /
Have you ever been a Director/Partner/Trustee or held a greater than 10% shareholding in an entity that has: been liquidated without a solvent liquidation certificate; been in receivership; been in voluntary liquidation; entered into a creditor payment plan? (CIRCLE)	Y N	Have you ever been a Director/Partner/Trustee or held a greater than 10% shareholding in an entity that has: been liquidated without a solvent liquidation certificate; been in receivership; been in voluntary liquidation; entered into a creditor payment plan? (CIRCLE)	Y N
If yes, provide the name of the entity and any details you wish us to consider:		If yes, provide the name of the entity and any details you wish us to consider:	
Have you ever been a Director/Partner/Trustee or held a greater than 10% shareholding in an entity that has been subject to a solvent liquidation? If yes, attach the solvent liquidation certificate from a Chartered Accountant. (CIRCLE)	Y N	Have you ever been a Director/Partner/Trustee or held a greater than 10% shareholding in an entity that has been subject to a solvent liquidation? If yes, attach the solvent liquidation certificate from a Chartered Accountant. (CIRCLE)	Y N
Have you ever been bankrupt? (CIRCLE)	Y N	Have you ever been bankrupt? (CIRCLE)	Y N

I/WE DECLARE THAT ALL INFORMATION CONTAINED WITHIN THIS APPLICATION IS TRUE AND CORRECT AND THAT I/WE HAVE READ AND UNDERSTOOD THE FOLLOWING TERMS OF SALE. I/WE JOINTLY AND SEVERALLY AGREE TO BE BOUND BY THE TERMS OF SALE AS WELL AS THE CLIENT ENTITY FOR WHICH I/WE SIGN ON THE BEHALF OF (IF APPLICABLE) AND WARRANT THAT I/WE AM/ARE AUTHORISED TO BIND THAT ENTITY TO THEM.

Signature:		Signature:	
Date:	/ /	Date:	/ /

Notes

All the details on this form are checked for accuracy including the full legal name, entity number, individual's details (including whether **all** Directors/Partners/Trustees have been included) and the details of past liquidations/receiverships.

If any details are found to be incorrect, the form will be returned for completion/correction or credit refused

application for credit addendum sheet

E Additional Director/Trustee/Partner's details

CONT.

Director / Partner / Trustee / Individual / Other		Director / Partner / Trustee / Individual / Other	
Full name:		Full name:	
Home address:		Home address:	
Mobile number:		Mobile number:	
Date of birth:	/ /	Date of birth:	/ /
Have you ever been a Director/Partner/Trustee or held a greater than 10% shareholding in an entity that has: been liquidated without a solvent liquidation certificate; been in receivership; been in voluntary liquidation; entered into a creditor payment plan? (CIRCLE)	Y N	Have you ever been a Director/Partner/Trustee or held a greater than 10% shareholding in an entity that has: been liquidated without a solvent liquidation certificate; been in receivership; been in voluntary liquidation; entered into a creditor payment plan? (CIRCLE)	Y N
If yes, provide the name of the entity and any details you wish us to consider:		If yes, provide the name of the entity and any details you wish us to consider:	
Have you ever been a Director/Partner/Trustee or held a greater than 10% shareholding in an entity that has been subject to a solvent liquidation? If yes, attach the solvent liquidation certificate from a Chartered Accountant. (CIRCLE)	Y N	Have you ever been a Director/Partner/Trustee or held a greater than 10% shareholding in an entity that has been subject to a solvent liquidation? If yes, attach the solvent liquidation certificate from a Chartered Accountant. (CIRCLE)	Y N
Have you ever been bankrupt? (CIRCLE)	Y N	Have you ever been bankrupt? (CIRCLE)	Y N
I/WE DECLARE THAT ALL INFORMATION CONTAINED WITHIN THIS APPLICATION IS TRUE AND CORRECT AND THAT I/WE HAVE READ AND UNDERSTOOD THE FOLLOWING TERMS OF SALE. I/WE JOINTLY AND SEVERALLY AGREE TO BE BOUND BY THE TERMS OF SALE AS WELL AS THE CLIENT ENTITY FOR WHICH I/WE SIGN ON THE BEHALF OF (IF APPLICABLE) AND WARRANT THAT I/WE AM/ARE AUTHORISED TO BIND THAT ENTITY TO THEM.			
Signature:		Signature:	
Date:	/ /	Date:	/ /
This sheet forms part of the "Application for credit with Camelspace Limited" it is returned with, dated: (DATE MUST MATCH THAT IN SECTION B)			/ /