

**ACCOUNTS RECEIVABLE  
APPLICATION FOR CREDIT/CUSTOMER CREATION FORM**

**Company Code** 1100   
1200   
1400

Name: \_\_\_\_\_ ABN Number: \_\_\_\_\_

Street Address: 1. \_\_\_\_\_ Phone No: \_\_\_\_\_  
2. \_\_\_\_\_ Mobile Phone \_\_\_\_\_  
3. \_\_\_\_\_ Number: \_\_\_\_\_  
4. \_\_\_\_\_ Fax No: \_\_\_\_\_  
5. \_\_\_\_\_ E-Mail: \_\_\_\_\_  
Postcode: \_\_\_\_\_

Postal Address: PO Box No: \_\_\_\_\_ Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

I/We hereby request that you open a 30 day Credit Account in my/our name for the supply of NSW Police.

**Name of Directors / Partners**

1 \_\_\_\_\_ 3 \_\_\_\_\_  
2 \_\_\_\_\_ 4 \_\_\_\_\_

**References**

Bank: \_\_\_\_\_ Branch: \_\_\_\_\_ Phone No. \_\_\_\_\_

**Other Suppliers**

1	_____	_____	_____
	Name	Address	Phone No:
2	_____	_____	_____
	Name	Address	Phone No:

**Terms & Conditions**

I hereby state, as an authorised officer of the applicant Company/Business, that the information given above is true and accurate.  
I/We hereby authorise the NSW Police to make any enquiries as it considers necessary to decide whether to accept this application.  
I/We understand that my/our signature on this application constitutes acceptance by the applicant of payment terms within 30 days.  
I/We further accept liability jointly and severally with the applicant debtor agree to pay any expenses, on a solicitor and client basis, incurred in the collection of monies which become overdue on my account.

Signature of Applicant: \_\_\_\_\_ Signature of Witness: \_\_\_\_\_

**NSW POLICE USE ONLY**

**Requesting Officer**

Name: \_\_\_\_\_ Branch / LAC: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Eaglenet: \_\_\_\_\_

**Police Business Services Use Only**

Customer Created By (Name): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Customer No: \_\_\_\_\_ 

Date Received Stamp:
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