



APPLICATION FOR CREDIT FACILITIES

ENTERED INTO BETWEEN

M&D SPECIALISED FASTENERS CC

(Registration Number 87/21953/23)

**PO BOX 136174
ALBERTON NORTH
1456**

TEL: (011) 868 1172 FAX : (011) 868 1190

**550 DELFOS AVENUE
ALRODE SOUTH**

AND

(Hereinafter referred to as the applicant)



**APPLICATION FOR CREDIT FACILITIES TO
M&D SPECIALISED FASTENERS CC
BY A COMPANY**

INCORPORATING THE TERMS & CONDITIONS OF AGREEMENT & SURETYSHIP

NAME OF COMPANY _____

NAME UNDER WHICH COMPANY TRADES (if applicable)

REGISTRATION NUMBER _____

POSTAL ADDRESS _____

POSTAL CODE _____

PHYSICAL ADDRESS _____

DELIVERY ADDRESS _____

TELEPHONE NUMBER _____ **FAX** _____

CELL PHONE NUMBER 1) _____ **2)** _____

VAT NUMBER _____
(attach copy of certificate of registration)

TYPE OF BUSINESS _____

BUYERS NAME _____

TELEPHONE NUMBER _____ **EMAIL** _____
(buyer) (buyer)

FAX NUMBER _____
(buyer)

ARE OFFICIAL ORDER NUMBERS USED WHEN ORDERS ARE PLACED ?

YES

NO

(X applicable box)



ACCOUNTS

(person responsible for paying account) _____

TELEPHONE NUMBER _____

(accounts)

EMAIL _____

(accounts)

FAX NUMBER _____

(accounts)

AUDITORS

(or accounting officer) _____

ADDRESS _____

TELEPHONE NUMBER _____

IS PROPERTY OCCUPIED BY THE COMPANY RENTED OR OWNED ?

OWNED

RENTED

(X applicable box)

If OWNED, furnish ERF number and suburb as well as any bonds registered over the property and account number of bond(s)

ERF NO _____

Suburb _____

Bond Holder _____

Bond account number _____

If property is RENTED, furnish name, telephone number and address of landlord

Name _____

Telephone Number _____

Address _____

COMPANY'S BANKING DETAILS

Bank _____

Branch Code _____

Account number _____

Type of account _____



TRADE REFERENCES

NAME 1) _____

TELEPHONE NUMBER _____

NAME 2) _____

TELEPHONE NUMBER _____

NAME 3) _____

TELEPHONE NUMBER _____

DETAILS OF DIRECTORS

1) NAME _____

ID NUMBER _____

(attach copy ID)

ADDRESS _____

TELEPHONE NUMBER _____

2) NAME _____

ID NUMBER _____

(attach copy ID)

ADDRESS _____

TELEPHONE NUMBER _____

3) NAME _____

ID NUMBER _____

(attach copy ID)

ADDRESS _____

TELEPHONE NUMBER _____