CUSTOMER CREDIT APPLICATION FORM (CCAF)

BUSINESS INFORMATION Company Name: STELLA COMUNICATION GST No: 33DDFPM5858H1ZA Proprietor/Partners/Directors details: MAHESH KUMAR **Business Type:** Sole proprietorship **Billing Address:** 18A/65 Hongkong Plaza City: Tuticorin State: Tamilnadu Zip Code: 628002 **Registered Company Address:** 18A/65 Hongkong plaza City: Tuticorin State: Tamilnadu **Zip Code:** 628002 E-mail | Fax: stellamobiles@gmail.com **Credit Requested:** 100000 Date business commenced: 2018-03-17 **Nature of Business:** SHOP PROPRIETOR

BANK INFORMATION Account Name: STELLA COMMUNICATION **Account Number:** 275150050800089 Bank Name: TAMILNADU MERCANTILE BANK **Branch: KULATHUR** Type of Account: Email: stellamobiles@gmail.com **IFSC Code:** TMBL0000275 Phone: 9095510510

BUSINESS / TRADE REFERENCES

| Company name: | | | |
|----------------------|--|--|--|
| Address: | | | |
| Nature of Business : | | | |
| Phone: | | | |

AGREEMENT

- 1. All invoices are to be paid 21 days from the date of the delivery
- 2. Claims arising from invoices must be made within seven working days.
- 3. Finance charge of 1.5% per month will be assessed on all balance outstanding past terms
- 4. By submitting this application, you authorize to make inquiries into the banking and business/trade references that you have supplied.
- 5. In case of cheque bounce, all bank charges should be borne by the customer along with penalty fee of INR 500 per cheque.

I HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS MENTIONED ABOVE AND HEREBY AGREES TO ABIDE BY THEM. BY COMPLETING AND RETURNING THIS APPLICATION TO ELECTRONICS BAZAAR. THE APPLICANT REPRESENTS THAT ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT. THE APPLICANT WILL ALSO AGREE TO NOTIFY ELECTRONICS BAZAAR OF ANY CHANGE IN COMPANY

| SIGNATURES | | | | |
|--------------------------------|--|--|--|--|
| Name and Title: | | | | |
| Date: | | | | |
| 0000-00-00 | | | | |
| | | | | |
| (FOR OFFICIAL USE ONLY) | | | | |
| Sales Rep Name Employee Code : | | | | |
| Credit Limit: | | | | |
| Customer No: | | | | |
| Zone/State: | | | | |
| Approved By: | | | | |
| Date of Approval: | | | | |