CUSTOMER CREDIT APPLICATION FORM (CCAF)

BUSINESS INFORMATION

Company Name :

SA communication

GST No :

33BMJPA7553E2ZA

Proprietor/Partners/Directors details :

aRUNKUMAR

Business Type :

Sole proprietorship

Billing Address :

No 55 thirumeni nagarThalavaipalayam main road

City :

THANJAVUR

State :

Tamil Nadu

Zip Code :

613001

Registered Company Address :

SA COMMUNICATION NO 93 KEELARAJA VEETHI

City :

MANNARGUDI

State :

TAMILNADU

Zip Code :

614001

E-mail | Fax :

Sarockstar747@gmail.com

Credit Requested :

500000

Date business commenced :

2012-01-12

Nature of Business :

ONLINE AND OFFLINE RETAIL

BANK INFORMATION

Account Name :

ARUNKUMAR

Account Number :

917020054514420

Bank Name :

AXIS BANK

Branch :

THANJAVUR

Type of Account :

Email :

Sarockstar747@gmail.com

IFSC Code :

UTIB0000564

Phone :

8072588074

BUSINESS / TRADE REFERENCES

Company name :

ALFATECH ENTERPRISES

Address :

NO 93 MELABADMA SALAVAR STREET

Nature of Business :

ELECTRONICS sHOPPING MALL

Phone :

7904303252

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 OWNERSHIP OR MANAGEMENT

SIGNATURES

Name and Title :

ACER DEALER

Date :

2018-04-06

(FOR OFFICIAL USE ONLY)

Sales Rep Name Employee Code :

Credit Limit :

Customer No :

Zone/State :

Approved By :

Date of Approval :