CUSTOMER CREDIT APPLICATION FORM (CCAF)

BUSINESS INFORMATION

Company Name :

Unix Computer

GST No :

22AXKPR8896C1ZZ

Proprietor/Partners/Directors details :

Rajendra Rahangdale

Business Type :

Sole proprietorship

Billing Address :

Near SBI ATM Guru Ghashidas Plaza GE Raod

City :

RAIPUR

State :

Chhattisgarh

Zip Code :

492001

Registered Company Address :

Near SBI ATM Guru Ghasidas Plaza GE Road

City :

Raipur

State :

Chhattisgarh

Zip Code :

492001

E-mail | Fax :

unixcomputerraipur@gmail.com

Credit Requested :

500000

Date business commenced :

2011-01-01

Nature of Business :

Laptop Retailer

BANK INFORMATION

Account Name :

Unix Computer

Account Number :

914020040741187

Bank Name :

Axis Bank

Branch :

Raipur

Type of Account :

Email :

unixcomputerraipur@gmail.com

IFSC Code :

UTIB0001508

Phone :

9301411253

BUSINESS / TRADE REFERENCES

Company name :

SAI KRIPA COMPUTER

Address :

RAIPUR

Nature of Business :

IT Retailer

Phone :

9713224926

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 :

RAJENDRA RAHANGDALE

Date :

2018-03-24

(FOR OFFICIAL USE ONLY)

Sales Rep Name Employee Code :

Credit Limit :

Customer No :

Zone/State :

Approved By :

Date of Approval :