

To: **Multi Equipment & Office Suppliers (Pty) Ltd.** Date.....
("the Seller")

Name of Organization..... ("The applicant")

Nature of business

Postal Address Code.....

Delivery Address.....

..... Code.....

Phone No.: Fax No.:

E-Mail Address:

Ownership: Public Co./ Private Co./ Close Corporation / Other (If other Details please).....

Company Reg. No.:

Vat Registration No.:

Date of incorporation/commencement of business.....

Names and Identity Numbers of Directors/Members/Persons in charge of organization:

1..... 780509 5024 084

2..... 750721 5121 085

3..... 860822 5286089

Name and title of person responsible for payment of account.....

Bankers A/c. No.

Branch for how long operative (bank a/c).....

Estimated value of monthly purchases..... Credit ceiling that would be required.....

Trade references (please quote Company, account No's. and contact names):

1..... 9267708 Tel. +27 (0) 87 805 0500

2..... ECAC01 Tel. +27 11 455-6248

3..... KZERN003 Tel. 031 582 3703

On behalf of the applicant, being duly authorised to do so, I the undersigned, hereby warrant that the above information is true and correct. If this application is granted, I confirm that the applicant will pay the balance owing, within 30 days of the date of statement. Until such time as payment is made in respect of goods delivered, ownership of such goods will remain vested in the seller. Interest at prevailing rates may be charged by the seller on any overdue balance owing by the applicant.

Date..... Name..... Signature..... 