

# LexisNexis®

## Customer Account Application Form

Type of Account you wish to open

(Applications will not be processed without an order)

☐ Personal Account

☐ Company/Business Account

This form must be fully completed where a new account is required or there is a change of ownership of an existing account.  
No account shall exist pursuant to this application until it has been processed and approved.

### Purchasers Details

#### Personal Account

Surname

First Name

Middle Name

#### Current Residential Address

Suburb

State

Postcode

Country

#### Previous Residential Address

Suburb

State

Postcode

Country

#### Contact for Orders

Date of Birth

Drivers License No

Telephone

Fax

Email

#### Billing Details

Billing Address (if different from residential address)

Suburb

State

Postcode

Country

Contact for Payments

Telephone

Fax

Email

Company/Business Account (All those with a registered ABN must complete this section)

☐ Company ☐ Sole Trader ☐ Partnership ☐ Trust ☐ Other \_\_\_\_\_

Trading Since Date \_\_\_\_\_ Annual Turnover (Optional) \_\_\_\_\_  
Number of Employees \_\_\_\_\_ Number of Fee Earners \_\_\_\_\_

Legal Company/Business Name \_\_\_\_\_

Trading Name (Name under which account will be open) \_\_\_\_\_

Name of Service Company \_\_\_\_\_

Trading Address  
(Please note: postal box address will not be accepted)

Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_ Country \_\_\_\_\_  
ABN \_\_\_\_\_  
ACN \_\_\_\_\_

Shipping/Postal Address (If different)

Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_ Country \_\_\_\_\_

DX Address (Street Address must be provided)

DX Number \_\_\_\_\_ DX Location \_\_\_\_\_  
DX State \_\_\_\_\_ Country \_\_\_\_\_

Billing Address (If different)

Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_  
Telephone \_\_\_\_\_ Email \_\_\_\_\_

Reception Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Web Address \_\_\_\_\_

Areas of Practice / Interest

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Administrative                         | <input type="checkbox"/> Equity / Trust                  | <input type="checkbox"/> Migration                       |
| <input type="checkbox"/> Advertising, Marketing, Media & PR     | <input type="checkbox"/> Family                          | <input type="checkbox"/> Native Title                    |
| <input type="checkbox"/> Appellate                              | <input type="checkbox"/> General                         | <input type="checkbox"/> OH & S                          |
| <input type="checkbox"/> Banking / Finance                      | <input type="checkbox"/> Government                      | <input type="checkbox"/> Personal Injury                 |
| <input type="checkbox"/> Bankruptcy / Insolvency                | <input type="checkbox"/> Health                          | <input type="checkbox"/> Professional Negligence         |
| <input type="checkbox"/> Building & Construction                | <input type="checkbox"/> Industrial Relations            | <input type="checkbox"/> Property, Leases & Conveyancing |
| <input type="checkbox"/> Business                               | <input type="checkbox"/> IT                              | <input type="checkbox"/> Speculative Actions             |
| <input type="checkbox"/> Civil & Human Rights / Discrimination  | <input type="checkbox"/> Insolvency                      | <input type="checkbox"/> Succession                      |
| <input type="checkbox"/> Commercial                             | <input type="checkbox"/> Insurance                       | <input type="checkbox"/> Taxation & Superannuation       |
| <input type="checkbox"/> Consumer, Competition, Trade Practices | <input type="checkbox"/> Intellectual Property           | <input type="checkbox"/> Transportation                  |
| <input type="checkbox"/> Contract                               | <input type="checkbox"/> International                   | <input type="checkbox"/> Wills & Probate                 |
| <input type="checkbox"/> Corporate Advisory                     | <input type="checkbox"/> Licensing                       | <input type="checkbox"/> Workers Compensation            |
| <input type="checkbox"/> Corporate                              | <input type="checkbox"/> Litigation & Dispute Resolution | <input type="checkbox"/> Workplace & Employment          |
| <input type="checkbox"/> Criminal                               | <input type="checkbox"/> Medical Negligence              | <input type="checkbox"/> Non Legal                       |
| <input type="checkbox"/> Defamation                             | <input type="checkbox"/> Mergers & Acquisition           | <input type="checkbox"/> Other _____                     |
| <input type="checkbox"/> Environmental                          |  |  |

Directors, Sole Traders & Partnerships (If more than 3, please indicate how many) Number:

1. Full Name	D.O.B	Driver Licence No.
Residential Address		
2. Full Name	D.O.B	Driver Licence No.
Residential Address		
3. Full Name	D.O.B	Driver Licence No.
Residential Address		

### Contact & Invoice Information

Primary Purchaser/Contact	Job Title
Fax ( ) Telephone ( )	Email
Account Clerk Contact	Job Title
Fax ( ) Telephone ( )	Email
Financial Controller	Job Title
Fax ( ) Telephone ( )	Email

Trade / Credit References (Not Credit Card Companies or Finance Institutions) Include name of business to which reference applies

1. Name	Position
Company Telephone ( )	Email
Address	
2. Name	Position
Company Telephone ( )	Email
Address	
3. Name	Position
Company Telephone ( )	Email
Address	

(Please supply three)

The Applicant applies to Reed International Books Pty Ltd t/as LexisNexis (ACN 001 002 357) and its successors and assigns for a credit facility and declares that the information provided in this Account Application Form is true and accurate and has been provided to induce LexisNexis to grant the Applicant a trading account.

By accepting delivery of any Goods and Services the Applicant acknowledges that the supply of Goods and Services is subject to LexisNexis then current Terms of Trade and General Terms and Conditions if applicable as amended from time to time notified to you in writing. The Applicant acknowledges having received our General Terms and Conditions and Terms of Trade with this Application.

#### Execution

All persons signing on behalf of a company warrant that he/she has authority to sign this Agreement on behalf of the company. In case of Partnership, all Partners have to sign.

Full Name	
Position	
Date	Applicants Signature
Full Name	
Position	
Date	Applicants Signature
Full Name	
Position	
Date	Applicants Signature

For a copy of the LexisNexis Terms of Trade, please contact Customer Relations on **1800 772 772** or visit [www.lexisnexis.com.au/aus/customer/terms](http://www.lexisnexis.com.au/aus/customer/terms).

#### Customer Relations Details

Send your completed form:

By Fax 1800 800 122

By Mail Reply Paid 61280  
LexisNexis – Order Management  
Locked Bag 2222  
Chatswood Delivery Centre NSW 2067  
AUSTRALIA

For further information, call Customer Relations on **1800 772 772** or visit [www.lexisnexis.com.au](http://www.lexisnexis.com.au)

#### Important Privacy Notice

The information you provide on this form is being collected by Reed International Books Australia Pty Limited (Reed) for the purposes of processing your registrations or enquiry and keeping you informed of upcoming products, services, offers and events. The information is disclosed from time to time to our related bodies corporate for these purposes. The provision of this information by you is voluntary but if you do not provide some or all of the requested information we may be unable to properly process your registration. You have both a right of access to the personal information we hold about you and to ask us to correct it if it is inaccurate or out of date. Please direct any queries to The Privacy Officer, Reed International Books Australia or email to [privacy@lexisnexis.com.au](mailto:privacy@lexisnexis.com.au).

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