



REPRESENTATIVE _____

MPI Technology cc

Reg No CK95/19740/23

VAT Reg. No. 4500154036

Suite 111, Saambou Building, Cnr Penzance & Clinton Str Alberton P O Box 432, New Redruth, 1450 Tel: (011) 907 6441

Fax (011) 907 7057

E-mail mpi@mpitech.co.za / Website www.mpitech.co.zaAccount
No.**CREDIT APPLICATION / UNDERTAKING TO TRADE**
(A Surety Agreement is included in this Credit Application)

GENERAL INFORMATION											
FULL REGISTERED COMPANY NAME											
TRADING NAME (IF NOT AS ABOVE)											
OTHER TRADING NAMES IF ANY											
<input type="checkbox"/> PUBLIC COMPANY		<input type="checkbox"/> (PTY) COMPANY		<input type="checkbox"/> CLOSE CORPORATION		<input type="checkbox"/> PARTNERSHIP		<input type="checkbox"/> SOLE OWNERSHIP			
DATE OF REGISTRATION/ INCORPORATION/ESTABLISHMENT				REGISTRATION NUMBER							
ISO CERTIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO				VAT NUMBER							
PHYSICAL ADDRESS "applicant's <i>domicilium citandi</i> address"				POSTAL ADDRESS							
			CODE					CODE			
TELEPHONE NUMBER					FAX NUMBER						
CELLPHONE NUMBER					E-MAIL ADDRESS						
FULL NAMES OF DIRECTORS/MEMBERS/PARTNERS/OWNER											
1.					2.					3.	
I.D No.					I.D No.					I.D No.	
CONTACT: FINANCE (1)								POSITION			
NAME OF AUDITORS				DATE OF APPOINTMENT				TELEPHONE NUMBER:			
ARE AUDITED FINANCIAL STATEMENTS AVAILABLE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE ATTACH A COPY TO THIS FORM											
NATURE OF BUSINESS											
PREMISES		<input type="checkbox"/> FACTORY		<input type="checkbox"/> WAREHOUSE		<input type="checkbox"/> SHOP		<input type="checkbox"/> OFFICES		<input type="checkbox"/> PRIVATE HOUSE	
ARE PREMISES		<input type="checkbox"/> OWNED BY APPLICANT		<input type="checkbox"/> OWNED BY ASSOCIATED COMPANY				<input type="checkbox"/> RENTED			
FINANCE DETAILS											
MAXIMUM CREDIT REQUIRED - PER MONTH				R							
PAYMENT TERMS - STRICTLY NETT - 30 DAYS FROM DATE OF MONTHLY STATEMENT											

OFFICE USE ONLY

Rep Code:	Industry code:	Segment code:	Local segment abbrev.	District:	Sales Div:	Discount Code:

TRADE REFERENCES (name & telephone number of four active & current major suppliers)

	NAME	TELEPHONE NO.	R- VALUE
1			
2			
3			
4			

BANKING DETAILS

BANKERS		BRANCH	
ACCOUNT NUMBER		BRANCH CODE	

VISIT ADDRESS

TELEPHONE (PURCHASING)	
FACSIMILE (PURCHASING)	
CONTACT NAME (PURCHASING)	
Do you accept partial deliveries?	
Do you accept partial invoicing?	
Special Invoicing Requirements	
Multiple Statements	<input type="checkbox"/> YES <input type="checkbox"/> NO
After hours buying procedure/ Delivery	

CONDITIONS OF CREDIT

- To abide by the General Conditions of Sale of MPI Technology cc, which I/We acknowledge myself/ourselves to be fully acquainted with.
- To make payment for all purchases within 30 days of the date of the Statement relating thereto.
- That the conditions contained herein and in the General Conditions of Sales of MPI Technology cc, may only be varied in writing by both parties, and shall be the basis of all future contracts between the parties and must be signed by both parties.
- To allow MPI Technology cc to make credit enquiries on the applicant by contacting various sources such as references, banks and any other information as supplied by the applicant to access any/all Credit Bureaus data bases prior to and or after granting credit; report on the conduct of the account to all Credit Bureaus and any other interested persons who require this information for the purposes of credit assessment.

TO BE COMPLETED BY OWNER/PARTNER/DIRECTOR/MEMBER

I, _____, hereby certify that I am duly authorised to sign this Credit Application/Undertaking to Trade, a copy of which has been handed to me, and record that I agree to the terms and conditions set out in Conditions of Credit above and confirm having read the Standard Trading Conditions printed overleaf, which have been specifically brought to my attention and by which I do agree to be bound.

SIGNED _____ **COMPANY RUBBER STAMP**

DESIGNATION _____

NAME _____

DATE _____