



POLIFILM South Africa (Pty) Ltd. P.O Box 17203 Randhart Alberton 1457

CREDIT APPLICATION FORM

REGISTERED NAME/S: _____
(Herein after referred to as the purchaser)

COMPANY REGISTRATION NUMBER: _____

VAT REGISTRATIONS NUMBER: _____

REGISTERED ADDRESS: _____

AUDITORS/ACCOUNTING OFFICER: _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____

_____ POSTAL CODE: _____

DELIVERY ADDRESS: _____

EMAIL ADDRESS: _____

ACCOUNTS CONTACT PERSON: _____

TEL NO: _____ FAX NO: _____

HOLDING CO: _____

DATE STARTED: _____

NATURE OF BUSINESS: _____

Directors: Garth Bentley (South Africa), Oliver Berger (Germany), Franck Valette (France)

POLIFILM SOUTH AFRICA (Pty) Ltd.
Culverwell Business Park
143 Houtbaai Street
Elandshaven
Germiston

Tel: +27 11 708 1041
Fax: +27 11 708 1578
Email: Garth.bentley@polifilm.co.za
Reg. No.1997/017774/07



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FULL NAMES **AND** ID NUMBERS OF: DIRECTORS /PARTNERS/ OWNER/ MEMBERS:

- 1) _____
- 2) _____
- 3) _____
- 4) _____

TRADE REFERENCES:

	SUPPLIER'S NAME	TEL #	FAX #	ACCOUNT NO:
1)	_____			
2)	_____			
3)	_____			
4)	_____			

BANKERS: _____

BRANCH: _____ ACCOUNT NO: _____

CREDIT LIMIT REQUIRED _____

Terms and Conditions attached, please initial each page.

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