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## CREDIT APPLICATION

A/c Code \_\_\_\_\_  
(office use only)

1. Applicant's Name \_\_\_\_\_  
(please indicate) Company / Partnership / Sole Proprietor / Incorporate Association

2. ABN \_\_\_\_\_

3. Postal Address (all invoices, statements etc will be sent to this address)

\_\_\_\_\_  
\_\_\_\_\_

4. Physical Address \_\_\_\_\_

Ph: \_\_\_\_\_ Fax: \_\_\_\_\_

5. Accounts Email Address: \_\_\_\_\_

Second Email Address: \_\_\_\_\_

6. Pick up and Delivery Address (if different from physical address)

\_\_\_\_\_  
\_\_\_\_\_

7. Account Contact \_\_\_\_\_ Ph: \_\_\_\_\_

8. Pick up and Delivery Contact \_\_\_\_\_ Ph: \_\_\_\_\_

9. Full Name, Private Address & Phone No. of Directors/Partners/Sole Trader

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Nature of Business \_\_\_\_\_ No. of Staff \_\_\_\_\_

11. Parent Company (if applicable) \_\_\_\_\_

12. Amount of Credit Facility Required (monthly) \$ \_\_\_\_\_

13. Bank Details: Name of Bank \_\_\_\_\_ Branch Address \_\_\_\_\_

14. Trade References (minimum of 3 required)

1. \_\_\_\_\_ Ph: \_\_\_\_\_

2. \_\_\_\_\_ Ph: \_\_\_\_\_

3. \_\_\_\_\_ Ph: \_\_\_\_\_

I/We acknowledge and accept the "Terms and Conditions of Trade and Carriage" provided on reverse of this form and agree to abide by the terms and conditions. Furthermore, I/We certify the information given by me/us is true and correct.

Signature of Applicant or Authorised Representative \_\_\_\_\_ Date \_\_\_\_\_

Full Name \_\_\_\_\_ Position \_\_\_\_\_

Witness' Signature \_\_\_\_\_ Witness' Name \_\_\_\_\_

- Please note APD Parcel Delivery charge a monthly Account Admin. Fee