



FITZPATRICK SUPREME PTY LTD.
Trading as:
EURO MASTER Smallgoods & Fine Foods.

Tel: (02) 9602 8172 Fax: (02) 9822 4357
35 Scott Street. LIVERPOOL NSW 2170.
ABN 52 065 273 412. www.euromaster.com.au

WEEKLY CREDIT ACCOUNT APPLICATION – Commencing From/...../.....

Company / Partnership / or Sole Trader Name:

.....

Address{Owners}..... Tr
ading Name:

.....

{BusinessAddress}.....

Business Name

Telephone: (Business)..... Fax..... After

Hours..... Mobile.....

Type of Business: * Sole Trader * Partnership * Company * ABN.....

Years in Business..... Own/lease/rent these premises{please circle the answer} When did you occupy these
premises...../...../20.....

Bank..... Branch

Account No.....

Trade References:

1 Name Contact..... Phone.....

2 Name..... Contact..... Phone.....

3 Name..... Contact..... Phone.....

I/WE HEREBY APPLY FOR A SEVEN (7) DAY ACCOUNT TO BE ESTABLISHED WITH FITZPATRICK SUPREME PTY LTD AND AGREE TO THE CONDITIONS AND TERMS AS SET OUT BELOW:

1. PAYMENT OF ACCOUNTS IS DUE WITHIN SEVEN (7) DAYS OF INVOICE DATE
2. ALL ACCOUNTS ARE ON C.O.D. BASIS UNTIL CREDIT IS APPROVED.
3. TITLE TO THE GOODS SUPPLIED DOES NOT PASS TO THE BUYER UNTIL FULL PAYMENT FOR THOSE GOODS IS RECEIVED BY EURO MASTER SMALLGOODS & FINE FOODS {FITZPATRICK SUPREME PTY LTD}
4. CLAIMS FOR DAMAGE, OVERCHARGING OR SHORT DELIVERY MUST BE MADE WITHIN 24 HOURS OF DELIVERY
5. THE COMPANY RESERVES THE RIGHT TO CHARGE INTEREST ON ANY OVERDUE BALANCE AT A RATE OF 4% HIGHER THAN OVERDRAFT RATES APPLICABLE TO FITZPATRICK SUPREME PTY LTD AT THE TIME.

IN CONSIDERATION OF FITZPATRICK SUPREME PTY LTD HAVING AGREED TO SUPPLY MEAT SUPPLIES AND SERVICES ON CREDIT TO THE ABOVE NAMED CUSTOMER I/WE HEREBY JOINTLY AND SEVERALLY GUARANTEE PAYMENT ON DEMAND OF ALL MONIES OWING TO FITZPATRICK SUPREME PTY LTD ON ANY ACCOUNT AND THIS SHALL BE A CONTINUING GUARANTEE AND SHALL NOT BE AFFECTED BY ANY INDULGENCE OF TIME GIVEN BY FITZPATRICK SUPREME PTY LTD OR BY ANY OTHER FACT OR CIRCUMSTANCE OF ANY NATURE WHATSOEVER.

SIGNED BY)

SIGNED BY)

Print name

Print name.....

IN THE PRESENCE OF WITNESS-

IN THE PRESENCE OF WITNESS –

Signed by Date...../...../20.....)

Signed by Date...../...../20.....)

Print name-.....)

Print name:-

.....)

.....
Secretary (Guarantor's Name)

.....
Director (Guarantor's Name)

{Owner's Mobile phone.....}

{Owner's Mobile phone.....}

{ Approved by Fitzpatrick Supreme P/L -Euro Master Smallgoods –approved and signed by
.....{./ 20.....}