

APPLICATION FOR CREDIT

This account application shall be in respect of Agritec Pty Ltd (ABN 36 113 930 466) trading as 'Centor Oceania' ("Centor Oceania") for a credit account.
PLEASE READ THIS APPLICATION, THE NOTES AND THE TERMS AND CONDITIONS CAREFULLY SO THAT YOUR APPLICATION CAN BE AUTHORISED.
IT IS IMPORTANT THAT ALL INFORMATION THAT IS SUPPLIED IS CORRECT AND COMPLETED FOR ALL REQUIRED SECTIONS.
OTHERWISE CENTOR OCEANIA WILL BE UNABLE TO ACCEPT YOUR CREDIT APPLICATION.

SECTION 1 - GENERAL INFORMATION (MUST BY COMPLETED BY APPLICANT)

ENTITY DETAILS

LEGAL ENTITY NAME:

(Company name (i.e. name ending with 'Pty Ltd', 'Pty', 'Ltd' or similar), Partnership name, Sole Trader name etc.)

ABN (AUSTRALIAN BUSINESS NUMBER) / INTERNATIONAL BUSINESS NUMBER:

(A Legal Entity must have a linked Business Number in order to be able to proceed with this Credit Application)

ACN (AUSTRALIAN COMPANY NUMBER) / INTERNATIONAL COMPANY IDENTIFICATION NUMBER:

(If a Company Name is provided in the 'Legal Entity Name' section above, this section must be filled with the applicable details)

BUSINESS DETAILS

BUSINESS NAME:

(if applicable, noting that many Legal Entity's trade under a distinct business name)

PREVIOUS BUSINESS NAME:

(if Business Name above has changed within the past two years)

TRUST NAME (LINKED TO LEGAL ENTITY):

(If the Legal Entity intends to complete this Credit Application on behalf of a Trustee, insert the full name of the underlying trust above)

PHYSICAL ADDRESS

ADDRESS LINE 1:

ADDRESS LINE 2:

SUBURB:

STATE / TERRITORY:

POSTCODE / ZIPCODE:

MAILING ADDRESS

ADDRESS LINE 1:

ADDRESS LINE 2:

SUBURB:

STATE / TERRITORY:

POSTCODE / ZIPCODE:

CONTACT DETAILS

TELEPHONE NUMBER:

FACSIMILE NUMBER:

MOBILE NUMBER:

CONTACT NAME:

CONTACT EMAIL:

CONFIRMATION OF BUSINESS LEGAL STATUS

(Please tick applicable box below depending upon your responses to the 'Entity Details' section above to confirm your business legal status, and proceed to the section below as prompted)

SOLE TRADER (PLEASE GO TO SECTION 2A)

PARTNERSHIP (PLEASE GO TO SECTION 2B)

COMPANY (PLEASE GO TO SECTION 2C)

OTHER (PLEASE CONSULT CENTOR OCEANIA FOR FURTHER INSTRUCTION)

(If the Legal Entity above intends to complete this Credit Application on behalf of a trust as trustee, tick applicable box and proceed to the next section as prompted below.)

TRUST LINKED TO LEGAL ENTITY

- SOLE TRADER / INDIVIDUAL AS TRUSTEE FOR TRUST (PLEASE GO TO SECTION 2A AND THEN TO SECTION 3)
- PARTNERSHIP AS TRUSTEE FOR TRUST (PLEASE GO TO SECTION 2B AND THEN TO SECTION 3)
- COMPANY AS TRUSTEE FOR TRUST (PLEASE GO TO SECTION 2C AND THEN TO SECTION 3)

PLEASE INITIAL HERE

SECTION 2 - PROPRIETOR / DIRECTOR INFORMATION (PLEASE COMPLETE WHERE RELEVANT)

2A SOLE TRADER / INDIVIDUAL					
FULL NAME:			DATE OF BIRTH:		
DRIVER LICENCE NUMBER / PASSPORT NUMBER:					
<i>RESIDENTIAL ADDRESS</i>					
ADDRESS LINE 1:					
ADDRESS LINE 2:					
SUBURB:		STATE / TERRITORY:		POSTCODE / ZIPCODE:	
<i>CONTACT DETAILS</i>					
TELEPHONE NUMBER:		MOBILE NUMBER:		EMAIL:	
<i>IF BUSINESS PREMISES IS LEASED, PLEASE PROVIDE:</i>					
LESSOR NAME:					
LESSOR CONTACT DETAILS:					

**PLEASE CONTINUE TO SECTION 3 IF SOLE TRADER / INDIVIDUAL IS ACTING AS TRUSTEE FOR A TRUST
PLEASE CONTINUE TO SECTION 4 IF SOLE TRADER / INDIVIDUAL IS NOT ACTING AS TRUSTEE FOR A TRUST**

2B PARTNERSHIP					
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(Please provide name and residential address of each partner. Please provide details of any additional partners on a separate sheet (if applicable))

PARTNERSHIP NAME:					
AUSTRALIAN BUSINESS NUMBER / INTERNATIONAL BUSINESS NUMBER:					
<i>IF BUSINESS PREMISES IS LEASED, PLEASE PROVIDE:</i>					
LESSOR NAME:					
LESSOR CONTACT DETAILS:					

PARTNER 1					
FULL NAME:			DATE OF BIRTH:		
DRIVER LICENCE NUMBER / PASSPORT NUMBER:					
<i>RESIDENTIAL ADDRESS</i>					
ADDRESS LINE 1:					
ADDRESS LINE 2:					
SUBURB:		STATE / TERRITORY:		POSTCODE / ZIPCODE:	
<i>CONTACT DETAILS</i>					
TELEPHONE NUMBER:		MOBILE NUMBER:		EMAIL:	

PARTNER 2					
FULL NAME:			DATE OF BIRTH:		
DRIVER LICENCE NUMBER / PASSPORT NUMBER:					
<i>RESIDENTIAL ADDRESS</i>					
ADDRESS LINE 1:					
ADDRESS LINE 2:					
SUBURB:		STATE / TERRITORY:		POSTCODE / ZIPCODE:	
<i>CONTACT DETAILS</i>					
TELEPHONE NUMBER:		MOBILE NUMBER:		EMAIL:	

**PLEASE CONTINUE TO SECTION 3 IF PARTNERSHIP IS ACTING AS TRUSTEE FOR A TRUST
PLEASE CONTINUE TO SECTION 4 IF PARTNERSHIP IS NOT ACTING AS TRUSTEE FOR A TRUST**

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2C	COMPANY
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COMPANY NAME:	
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(Company Name (i.e. name ending with 'Pty Ltd', 'Pty', 'Ltd' or similar))

AUSTRALIAN COMPANY NUMBER / INTERNATIONAL IDENTIFICATION NUMBER:	
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STATE OF INCORPORATION / REGISTRATION:		DATE OF INCORPORATION / REGISTRATION:	
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HOLDING OR PARENT COMPANY

(Please insert details of holding company for the Company below (if applicable))

LEGAL ENTITY NAME:	
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(Company name (i.e. name ending with 'Pty Ltd', 'Pty', 'Ltd' or similar))

IF BUSINESS PREMISES IS LEASED, PLEASE PROVIDE:
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LESSOR NAME:	
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LESSOR CONTACT DETAILS:	
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(Please provide name and residential address of two directors below. By signing this Credit Application, the Applicant agrees that it must immediately notify Centor Oceania in writing of any change in directors or company detail).

DIRECTOR 1

FULL NAME:		DATE OF BIRTH:	
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DRIVER LICENCE NUMBER / PASSPORT NUMBER:	
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RESIDENTIAL ADDRESS

ADDRESS LINE 1:	
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ADDRESS LINE 2:	
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SUBURB:		STATE / TERRITORY:		POSTCODE / ZIPCODE:	
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CONTACT DETAILS

TELEPHONE NUMBER:		MOBILE NUMBER:		EMAIL:	
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DIRECTOR 2

FULL NAME:		DATE OF BIRTH:	
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DRIVER LICENCE NUMBER / PASSPORT NUMBER:	
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RESIDENTIAL ADDRESS

ADDRESS LINE 1:	
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ADDRESS LINE 2:	
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SUBURB:		STATE / TERRITORY:		POSTCODE / ZIPCODE:	
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CONTACT DETAILS

TELEPHONE NUMBER:		MOBILE NUMBER:		EMAIL:	
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**PLEASE CONTINUE TO SECTION 3 IF COMPANY IS ACTING AS TRUSTEE FOR A TRUST
PLEASE CONTINUE TO SECTION 4 IF COMPANY IS NOT ACTING AS TRUSTEE FOR A TRUST**

SECTION 3 – TRUST DETAILS (PLEASE COMPLETE WHERE RELEVANT)

(Please refer to clause 2 of Conditions for Application of Credit)

TRUST NAME:	
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AUSTRALIAN BUSINESS NUMBER / INTERNATIONAL BUSINESS NUMBER:	
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TYPE OF TRUST:	
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(e.g. discretionary trust, unit trust, etc.)

STATE / COUNTRY OF ESTABLISHMENT:	
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DATE OF INCORPORATION / REGISTRATION:	
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PLEASE CONTINUE TO SECTION 4

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SECTION 4 - CONTACT DETAILS (MUST BE COMPLETED BY APPLICANT)

4A PURCHASE DETAILS				
DO YOU PROVIDE A PURCHASE ORDER?				
REQUIRED CREDIT LIMIT:		\$		
PRIMARY PURCHASE CONTACT				
FULL NAME:				
TELEPHONE NUMBER:		MOBILE NUMBER:		EMAIL: _____ :
SECONDARY PURCHASE CONTACT				
FULL NAME:				
TELEPHONE NUMBER:		MOBILE NUMBER:		EMAIL: _____ :

4B ACCOUNTS PAYABLE CONTACT				
I / We give permission to Centor Oceania to send electronic messages, invoices and statements.				
PRIMARY ACCOUNTS PAYABLE CONTACT				
FULL NAME:				
TELEPHONE NUMBER:		MOBILE NUMBER:		EMAIL: _____ :
SECONDARY ACCOUNTS PAYABLE CONTACT				
FULL NAME:				
TELEPHONE NUMBER:		MOBILE NUMBER:		EMAIL: _____ :

PLEASE CONTINUE TO SECTION 5

SECTION 5 - PRIVACY AUTHORITY & CREDIT REFERENCES (MUST BE COMPLETED BY APPLICANT)

5A PRIVACY AUTHORITY				
You acknowledge you have read our TERMS OF USE which is located on our website at http://www.centoroceania.com				
<ol style="list-style-type: none"> I / We consent and agree that Centor Oceania may carry out all necessary credit checks for both commercial and consumer credit with any credit reference bureau as well as referees stated on this Credit Application. I / We understand that it is the applicant's responsibility to advise Centor Oceania of any changes to the applicants details. I / We consent and agree that Centor Oceania may obtain the above information from time to time for the purpose of reviewing and assessing credit worthiness. I / We acknowledge that the above authorisations will continue to remain in full force and be effective until the credit facility is cancelled. I / We agree in the event that the account remains outstanding in excess of sixty (60) days, Centor Oceania may report the default to any credit reporting agency. 				
APPLICANT 1				
FULL NAME:				
SIGNATURE:		DATED:		
APPLICANT 2				
FULL NAME:				
SIGNATURE:		DATED:		
APPLICANT 3				
FULL NAME:				
SIGNATURE:		DATED:		

This written agreement authorises Centor Oceania to access Applicant's credit file with any preferred credit reporting agency. **Note:** Must be signed by all persons whose names appear in Section 2 and/or Section 3 of this Credit Application.

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5B	TRADE REFERENCES
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(Major suppliers with whom you are currently trading)

COMPANY 1					
COMPANY NAME:					
ADDRESS LINE 1:					
ADDRESS LINE 2:					
SUBURB:		STATE / TERRITORY:		POSTCODE / ZIPCODE:	
TELEPHONE NUMBER:		ACCOUNT NUMBER:		EMAIL:	

COMPANY 2					
COMPANY NAME:					
ADDRESS LINE 1:					
ADDRESS LINE 2:					
SUBURB:		STATE / TERRITORY:		POSTCODE / ZIPCODE:	
TELEPHONE NUMBER:		ACCOUNT NUMBER:		EMAIL:	

COMPANY 3					
COMPANY NAME:					
ADDRESS LINE 1:					
ADDRESS LINE 2:					
SUBURB:		STATE / TERRITORY:		POSTCODE / ZIPCODE:	
TELEPHONE NUMBER:		ACCOUNT NUMBER:		EMAIL:	

PLEASE CONTINUE TO SECTION 6

SECTION 6 - DECLARATION (MUST BE COMPLETED BY APPLICANT)

In the last five (5) years has any Proprietor, Director or Manager of the Applicant been the subject of bankruptcy proceedings or been associated as a Manager, Member, Director or Partner of a business which has failed or was the subject of a Scheme of Arrangement, Receivership, Voluntary Administration, Liquidation or to which an Administration or Controller has been appointed?

YES: NO: IF YES PLEASE PROVIDE DATE: _____

I / We declare that the information given above is correct and I / We hereby apply for credit facilities for the purpose of goods and service from Centor Oceania.

I / We further declare that I / We have read, accepted and acknowledged the terms and conditions of sale of goods and the conditions for this Application of Credit.

APPLICANT 1			
FULL NAME:		POSITION:	
		<i>(Director / Partner / Owner)</i>	
SIGNATURE:		DATED:	

APPLICANT 2			
FULL NAME:		POSITION:	
		<i>(Director / Partner / Owner)</i>	
SIGNATURE:		DATED:	

APPLICANT 3			
FULL NAME:		POSITION:	
		<i>(Director / Partner / Owner)</i>	
SIGNATURE:		DATED:	

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SECTION 7- GUARANTEE (MUST BE COMPLETED BY APPLICANT)

We, the **GUARANTORS**, whose signatures appear below, have read the **attached** "Conditions for Application for Credit" and "Terms and Conditions of Sale" (hereunder Terms and Conditions); and in particular the indemnity clause, which provides that we guarantee the obligations of the applicant. The undersigned agrees to unconditionally guarantee payment of all sums owed, pursuant to this agreement and further agrees to its terms regarding venue and jurisdiction. This is intended to be a continuing guarantee and shall not be revoked except by written notice to the accounts department of Centor Oceania.

GUARANTOR 1			
FULL NAME:		POSITION:	
		<i>(Director / Partner / Owner)</i>	
SIGNATURE:		DATED:	

GUARANTOR 2			
FULL NAME:		POSITION:	
		<i>(Director / Partner / Owner)</i>	
SIGNATURE:		DATED:	

GUARANTOR 3			
FULL NAME:		POSITION:	
		<i>(Director / Partner / Owner)</i>	
SIGNATURE:		DATED:	

Please initial all pages to accept Terms & Conditions and mail entire document to Centor Oceania office, faxed copies will not be accepted.

76 Colemans Rd
 Carrum Downs VIC 3201 Australia
 Ph: (+61 3) 8779 2170
 E: accounts@centoroceania.com

OFFICE USE ONLY
COMMENTS

CREDIT LIMIT: \$ _____ **ACCOUNT NUMBER:** _____

APPROVED BY: _____ **SIGNATURE:** _____

DATED: _____ **ENTERED INTO JIWA:** _____

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CONDITIONS FOR APPLICATION OF CREDIT

1. The party detailed in Section 1 to Section 4 of the application for credit (the "**Applicant**") is not entitled to any credit facilities until the Applicant receives notice in writing from Agritec Pty Ltd (ABN 36 113 930 466) trading as 'Centor Oceania' (the "**Distributor**") stating that credit facilities have been granted.
2. Where the Applicant is a trustee:
 - (a) the Applicant agrees to produce a stamped copy of the trust deed (with all amendments) if and when requested by the Distributor; and
 - (b) the Applicant warrants that it has full power and authority for the benefit purposes and objects of the trust to make this application on behalf of the trust and that the Applicant shall be bound by the terms of this Application and be liable for payment of all monies owing to the Distributor both personally and as trustee.
3. The Applicant declares that the above information is true and correct in every particular and is aware that the Distributor will rely upon the correctness of the representations and information contained herein in granting credit facilities and any transactions associated therewith or entered into pursuant thereto.
4. The Applicant (if a corporation) is solvent and able to pay its debts as they fall due and is not in liquidation or being wound up and no meeting is being called or resolution is being passed or order made for such purposes and no receiver and/or manager has been appointed in respect of the Applicant and the Applicant has not made any compromise or arrangement with its creditors or any class of them and no Application has been proposed or made to any Court for any order summoning a meeting of its creditors or any class of them.
5. The Distributor may exercise any power under the *Privacy Act 1988* (Cth) relevant to assessing this credit application or collecting overdue payments from the Applicant.
6. If the Distributor considers it relevant to assessing the application for commercial credit or for collecting overdue payments, the Applicant agrees to the Distributor obtaining a credit report containing personal credit information about the Applicant in relation to commercial credit provided by the Distributor and in relation to collecting overdue payments. The Applicant will do all things necessary to help the Distributor obtain the credit report contemplated in this clause 6.
7. The Applicant agrees that the Distributor may give to and seek from any credit providers names in this credit application and any credit providers that may be named in a credit report issued by a credit reporting agency information about the Applicant's credit arrangements.
8. The Applicant understands the information may be used to:
 - (a) assess an application by the Applicant for credit;
 - (b) notify other credit providers of a default by the Applicant;
 - (c) exchange information with other credit providers as to the status of this credit account where the Applicant is in default with other credit providers; or
 - (d) assess the Applicant's credit worthiness.
9. The Applicant has read and understood the Terms and Conditions of Sale of Goods ("**Terms and Conditions**") attached to this Credit Application and in consideration of the Distributor supplying the goods the Applicant shall comply with, observe and perform the Terms and Conditions in respect of the purchase of the goods from the Distributor.
10. The Applicant agrees to indemnify the Distributor and keep the Distributor indemnified from and against and in respect of any claim, action, loss, cost, expense or liabilities suffered or incurred by the Distributor (regardless of whether indirect or direct) arising from or in any way related to the breach of any of the Terms and Conditions.
11. The Applicant has had full and ample opportunity prior to the execution of this Credit Application to obtain independent legal advice as to the extent and implications of this Credit Application and executes this Credit Application accordingly.

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