



FERREIRA'S ELECTRICAL WHOLESALERS

2 DIAZ AVENUE, EASTLEIGH, EDENVALE 1610

TEL: (011) 609 5774

FAX: (011) 452 3690

info@fews.co.za

1. FULL REGISTERED NAME :	POSTAL ADDRESS:
NATURE OF BUSINESS :	TELEPHONE No :
REGISTERED OFFICE :	TELEFAX No :
DATE OF INCORPORATION :	E-MAIL :
PHYSICAL TRADING ADDRESS :	COMPANY CK No :
	VAT REG. No :
	NAME AND TELEPHONE No. OF AUDITOR/ACCOUNTANT :

2. a. TYPE OF BUSINESS: PUBLIC COMPANY (PTY) LTD CLOSED CORP. PARTNERSHIP SOLE

b. CREDIT LIMIT REQUIRED :

FULL NAME, HOME ADDRESS AND HOME TELEPHONE No. OF ALL DIRECTORS AND SHAREHOLDERS, MEMBERS, PARTNERS, PROPRIETORS. (LIST SEPERATELY IF INSUFFICIENT SPACE AVAILABLE)

3. 1) _____

2) _____

3) _____

4) _____

4. NAME AND TITLE OF PERSON RESPONSIBLE FOR PAYMENT OF THIS ACCOUNT:

5. NAME OF BANK , BRANCH AND BANK ACCOUNT No:

6. REFERENCES:

NAME:	TELEPHONE No.	AMOUNT	TERMS	HOW LONG
1)				
2)				
3)				
4)				

7. IF YOU HAVE ANY JUDGEMENTS NOTED, NOTARIAL BONDS OR OTHER FORMS OF SECURITY REGISTERED IN FAVOUR OF ANY CREDITOR, LIST FULL DETAILS HERE. WE RELY ON THIS INFORMATION. IF NOT APPLICABLE, PLEASE MARK N/A

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT. I AGREE TO ABIDE BY THE CONDITIONS SET OUT ON THE OPPOSITE PAGE, THE TERMS OF WHICH I ACKNOWLEDGE I'VE READ AND UNDERSTOOD. IF THE APPLICANT IS A COMPANY OR CLOSED CORPORATION, I, THE SIGNATORY, BY MY SIGNATURE HEREBY BIND MYSELF AS SURETY AND CO-PRINCIPAL DEBTOR IN SOLIDUM WITH THE APPLICANT, WHOMEVER'S NAME APPEARS IN 1. ABOVE, FOR THE OBLIGATIONS OF THE APPLICANT TO FERREIRA'S ELECTRICAL WHOLESALERS

FULL NAME: _____

TITLE: _____

ADDRESS: _____

DATE

ON BEHALF OF APPLICANT
(SIGNATURE AND RUBBER STAMP)

TERMS AND CONDITIONS

I/We apply for credit facilities to be granted to me/us by your firm in respect of goods to be supplied and/or services to be rendered, upon the following terms and condition.

1. Notwithstanding the grant of credit facilities to me/us, Ferreira's Electrical Wholesalers shall be entitled at any time, and in our sole discretion to withhold such facilities and require repayment of any account.
2. I/We undertake to pay any account rendered within a period of 30 days reckoned from date of statement on which credit was granted
3. Should I/We fail to pay the amount within a period of 30 days from date of the statement, I/We agree to pay 2 1/2 percent penalty charge on the outstanding amount.
4. I/We undertake to pay all legal expenses incurred in connection with the recovery of any account due by me/us , including all collection charges , as between attorney and client , which may be payable in respect of the collection of such account.
5. I/We agree that the addresses given shall be my/our domicillium citandi et executandi for all purposes under this agreement, whether in respect of course process, notices or other documents or communications, of whatever nature.
6. Should it be necessary for you to institute legal proceedings for recovery of any account due by me/us, then I / we consent that the Magistrate's Court shall have jurisdiction to hear and determine such action.
7. I/We undertake to notify you in writing within seven (7) days of any change of address.
8. No addition to , variation or cancellation of this agreement shall be of any force and effect unless contained in writing and signed by or on behalf of the parties.
9. Returns are to be made within 7 days of purchase.
10. I consent to Ferreira's Electrical Wholesalers' checking my credit records with any credit reference agency. I also consent to Ferreira's Electrical Wholesalers' providing credit reference agencies with regular updates about the conduct of my accounts, including the failure to meet the agreed terms and conditions. I also agree that the reference agencies may, in turn make my record and details available to other credit grantors.
11. All goods remain the property of Ferreira's Electrical Wholesalers until paid for in full.

Date: _____ Name: _____

Signature: _____ Place: _____

GUARANTEE / SURETYSHIP

by partners/directors of: _____

I/We, the undersigned,

NAME: _____ SIGNATURE: _____

NAME: _____ SIGNATURE: _____

NAME: _____ SIGNATURE: _____

NAME: _____ SIGNATURE: _____

Do hereby bind myself/ourselves as surety/sureties and co -principal debtors/s in solidium to Ferreira's Electrical Wholesalers (Hereinafter referred to as "the creditor") for the payment on demands of all sums of money which the abovementioned applicant, namely _____

(hereinafter referred to as "the debtor") may now and from time to time hereafter owe or become indebt unto the creditor in respect of goods sold and delivered by the creditor or the debtor.

DATED at _____ on this the _____ day of _____ 20 _____

AS WITNESS:

1) _____

FOR OFFICE USE ONLY

Acc name: _____

Acc No.: _____

Bank code: _____