



These are the required details upon which GSM Systems is prepared to contract in respect of all purchases of goods for a credit facility. The terms and conditions document consists of 2 pages which I/we acknowledge having read and understood. This contract has been entered into based upon the particulars appearing below, all of which shall be deemed material information.

Account No.:

Registered Name of Business:

Company Registration No.:

VAT Registration No.:

Accounts Payable - Postal Address:

Physical Address:

Telephone No.:

Fax No.:

Mobile Phone No.:

Contact Person:

(A copy of the Certificate of Incorporation and Memorandum and Articles of Association must be attached)

PLEASE INDICATE TYPE OF BUSINESS

Public Company	<input type="checkbox"/>	Private Company	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>
Name of Directors/ Relevant Official		Business Address Directors		Office Telephone No.		Mobile Telephone No.

PLEASE INDICATE NATURE OF BUSINESS CONDUCTED

Contractor Proprietor If Tender, please provide details/Copy of Tender Documents

FINANCIAL DETAILS

Name of bankers: _____ Tel.: _____ Branch Name & No.: _____

Account No.: _____ Account Type: _____

AUDITORS

Name: _____ Tel.: _____

Address: _____

CONTRACTOR'S DETAILS

Name: _____ Tel.: _____

Address: _____

Previous Transactions with GSM SYSTEMS

Amount : _____ Date of Transaction: _____

TRADE REFERENCES (3 references must be given)

Name	Contact Number	Remarks



I/We certify the above information is true and correct and hereby make application for a _____ day credit facility in the amount of \$ _____ with GSM Systems and for the issuing of a credit facility. I/We hereby grant permission to GSM Systems to conduct a credit check on the business affairs of our business and our directors.

Signed: _____
Director

Designation _____ Date _____

Customer's Name: _____ Customer's Name: _____

FOR OFFICE USE ONLY

APPROVALS FRAMEWORK

SALES DIRECTOR

CREDIT MANAGER'S RECOMMENDATION

DOCUMENTATION TO BE ATTACHED (✓)

Memorandum and Articles of Association	of <input type="checkbox"/>	Copy of latest Balance Sheet	<input type="checkbox"/>
Copy of the Purchase Order	<input type="checkbox"/>	Copy of Accounts Payable process	<input type="checkbox"/>

APPROVAL

Sales Director	_____	Date	_____
Credit Manager	_____	Date	_____
SFC	_____	Date	_____
CFO	_____	Date	_____