



**ROGERS  
TRANSPORT**  
PTY. LTD. A.B.N. 12 874 280 054

**WAREHOUSE & DISTRIBUTION SPECIALISTS**

P O Box 721  
Capalaba Qld. 4157

99 Franklin St  
Rocklea Qld 4106

Phone: (07) 3275 3664  
Fax: (07) 3275 3661

**APPLICATION FOR CREDIT**

Trading Name of Company:

Trading Address:

ABN/ACN:

Postal Address:

Telephone No:

Facsimile No:

Credit Limited Requested (AUD) :

\$

Name of Person(s) Responsible for  
Administration of Account:

(1)

(2)

Trade References:

(1)

Phone:

(2)

Phone:

(3)

Phone:

**Credit Terms:**

Invoices are payable no later than 14 days from the date of invoice. I/We hereby authorise Rogers Transport Pty Ltd to contact the above mentioned referees for the purpose of obtaining credit information on the accounts operated by me/us with those organisations. We agree to a credit provider being given a consumer credit report to collect overdue payments on commercial credit. (Section 18k 1(b), & Sections 18k 1(h), Privacy Act 1988). Please note that overdue accounts will incur a 12.5% surcharge if trading terms exceeded. Any expenses, costs or disbursements incurred in recovering any outstanding monies including debt collection agency fees and solicitors costs shall be paid by me/us. My signature below indicates my agreement and acceptance to these terms and conditions.

Signed (1):

Date:

Signed (2):

Date: