

Debtor Credit Account Application Form



Privacy Notice: Council deals with your personal information in accordance with law including the *Information Privacy Act 2009*. Some of this information may be given to your nominated Trade Referees for the purpose of assessing your application. Your personal details will not be disclosed to any other person or agency external to Council without your consent unless required or authorised by law.

This form is to be completed when a company is applying for a credit account with Council for transactions to be charged and invoiced to.

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Customer Details			
Registered trading name:		ABN:	
Trading address:			
Street number and name		City	State Postcode
Postal address (if different):			
Preferred contact number:		Email:	
Preferred delivery method: <input type="checkbox"/> Email <input type="checkbox"/> Post <input type="checkbox"/> Collect – (Rockhampton, Gracemere, Mt Morgan) <i>Email is the standard form of delivery. If this is method is unsuitable please select an alternative.</i>			
Trade Reference Details (A trader referee is a supplier with which you conduct regular business with, used as a means of verifying your creditworthiness – please provide two trade references, and ensure that your referees are made aware that Council may be contacting them on your behalf.)			
Trade Reference One			
Registered trading name:		Contact number:	
Address:			
Street number and name		City	State Postcode
Trade Reference Two			
Registered trading name:		Contact number:	
Address:			
Street number and name		City	State Postcode
Declaration			
I understand the trading terms for accounts are 30 days from date of invoice. I am aware that any default on payment beyond these terms, may result in recovery action and cancellation of the account. Any further transactions will only be accepted on a cash basis.			
Name:		Signature:	Date:
Page 2 of this form must be completed by all companies intending to access the Lakes Creek Road Waste Management Facility.			

OFFICE USE ONLY	References checked by:	Signature:	Date:
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