

DEALER APPLICATION

Broadcast Lines cc

PO Box 173 Randburg, 2125

Tel: +27 (0)11 792-1451 / Fax: +27 (0)11 793-6699

E-mail: sylvie@broadcastlines.co.za

VAT No.: 4620211252 / CK2004/027063/23

Company Details:

Company Name	_____	Trading Name	_____
Holding Company:	_____	How long in business	_____
CK No.:	_____	V.A.T Reg. No	_____
Reception Tel. No.:	_____	Main Fax No.:	_____

Postal Address: _____

Physical Address:	_____	Delivery Address	_____
	_____	(if different)	_____
	_____		_____

Nature of Business: _____

Buyer's details / Person responsible for placing orders

Contact Person	_____	E-mail address:	_____
Direct Tel. No.:	_____	or ext.:	_____
Cell number:	_____		

Accounts Department Details:

Contact Person	_____	E-mail address:	_____
Direct Tel. No.:	_____	or Ext.:	_____
Name of Auditors:	_____	Tel. No.:	_____
Bank:	_____	Branch.:	_____
Account Number:	_____	Tel.:	_____
Premises:	_____ Leased	_____ Owned	
Est. Av. Monthly Purchase:	_____		

Full name of Directors: (in case of Partnership, names & address of each partner to be supplied)

Name	ID	Physical Address
1	_____	_____
2	_____	_____
3	_____	_____

It is hereby warranted that the information inserted in this Credit Application is true and correct and no relevant information that could incriminate this application has been withheld.

Name of Applicant: _____ Position: _____
He/She hereby warranting that he/she has the requisite authority to sign this application on behalf of the applicant.

Signature: _____ Date: _____