	TO		PO BOX 109104, Nev Auckland 1149		wmark	
RETRO AUTO PAR PREMIJN DUBLITY REPLACEMENT DUTO	FRIS		Acco		unt No.	
			Date Oper	/ 1ed:	1	
redit Application (F	lease copy both sides for your records)	(LAND email: e)	memz@hotmail.com			
ame of Account:	FAX: (09)	2794549				
Company Name or Fuil Personal Na Physical Address:	ne		ding Name			
Postal Address:						
legisteredOffice:						
ate Business Started:						
ype of Business: Sole T	_					
elephone: Business (0)	Facsimile(0)	N	1obile (O )			
irectors/Partners/Proprietors: (Busin	essAccount)					
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ales Contact:						
mployer Details: (Personal Account)	Accounts contact.					
	Farancia					
ccupation:	Employer:					
ccountant:	Telephone:(0					
olicitor:	Telephone:(0)					
ame of Bank:	Branch:					
leferences: Please provide the names and teleph	ne numbers of three trade references.					
)		Telephone	: (0 )			
)		Telephone	:: (0 )			
i)						
I hereby apply to open a Credit Trading Account and confirm month following invoice and that a default penalty will be cha eipt of the Terms of Trade of EXNER NZ LTD or any of its su	that the above information is accurate and complete in all ged at 2% per month on overdue accounts. We declare	I material respects. I/We ur	nderstand that normal pay	ment terms are	on 20 <sup>th</sup> of	
igned:	Print Name:					