



Barcoo Shire Council

ABN 34 668 298 330

Confidential Credit Application - Debtors

Please return to PO Box 14, Jundah QLD 4736

Email: shire@barcoo.qld.gov.au

1. Applicant's Information			
Surname or Company:		Date of Birth:	
Given Names:		ABN No:	
Trading Name:		ACN No:	
Registered Address: <i>(if Company)</i>		State:	Postcode:
Street Address:		State:	Postcode:
Mailing Address:		State:	Postcode:
Telephone:	Mobile:	Fax:	
Email:		Date Commenced:	
PERMISSION TO EMAIL:	YES or	NO	

2. Applicant's Business Activity			
State Principal Activity:			
Please Tick:	Company/Partnership	Sole Trader	Other

3. Details of Applicant(s)			
<i>(If a Business, please provide details of Directors, Partners or Owners. If other, please provide Board or Committee Members)</i>			

1. Name:	2. Name:	3. Name:
Title:	Title:	Title:
Address:	Address:	Address:
Phone No:	Phone No:	Phone No:
Email:	Email:	Email:

4. Individual Person	
Drivers licence number:	
Medicare number:	

5. Terms & Conditions

I/We hereby apply for a credit account as per the details submitted and understand that if credit is granted it will be subject to the following conditions:

- The customer must notify Barcoo Shire Council of any changes to the following:
 - Business Activity
 - Postal or Business Address
 - Ownership or Directors of the Business
- Payment for all debtors are due within thirty (28) days of the issue of Councils Invoice
- After an account has been outstanding for a period of thirty (28) days a letter is sent along with the statement requesting payment within fourteen (14) days.
- If no payment is received within fourteen (14) days, a final letter of demand will be sent detailing that failure to pay the final demand letter may mean Council shall undertake legal recovery.

Signature of Authorised Representative:	_____
Full Name <i>(please print)</i> :	_____
Title:	_____
Date of Agreement:	_____

Office Use Only:			
Date Received:	Debtor Code:		
Entered By:	Date:	Confirmed By:	Date: