Seafood Distributors & Processors
Established 1997. Servicing the ACT & Region

Re: Application for Credit Terms

Dear Sir / Madam,

Thank you for your interest in applying for Credit Terms with FishCo Fish Market.

We are a family owned and operated business specialising in the distribution and processing of fresh & frozen fish and seafood to the ACT and region. We take pride in supplying a large variety of quality produce at competitive prices.

We have drawn on over 40 years in the industry to establish excellent relationships with a quality supply chain that encompasses Australia and overseas. We buy from Sydney Markets as well as directly from quality assured Fishermen's Co-ops and Aquaculture Farms, with deliveries arriving daily.

Our wholesale customers can take advantage of wholesale pricing (which is emailed weekly with a stock listing) and delivery options within the ACT.

Please find a Credit Application and <u>optional</u> Credit Card authority attached. Page 1 & 2 of the Credit Application must be completed and signed.

Please note that our Credit Trading terms are 14 days from date of each invoice. Accounts may be temporarily placed on "payment on delivery" (COD) terms if they become overdue.

Accounts can be paid by Cash, Electronic Funds Transfer (EFT) or Debit/Credit Card (0.7% surcharge).

If you accept our Trading Terms & Conditions which are outlined on page 2, please return the signed application. Please note that by signing the application, you will be personally responsible for payment of the account as per our Terms.

Sincerely,

Anthoula Fragopoulos

Finance Officer

FISHCO FISH MARKET - CREDIT APPLICATION VOLANNE PTY LTD

ABN 90 077 412232

Registered Business	Name:					
Trading Name:						
ABN:		Year this b	Year this business was established:			
Postal Address:						
Title: (circle) Proprie	etor/ Manager/ Directo	or Name:				
Business Number: ()	Mobile Nur	Mobile Number:			
Kitchen Contact (C	hef/Orders, if differen	nt from above):				
Mobile:		Email:				
Delivery Address: _						
Contact Name for A	Account Queries:					
Phone Number: ()	Mobile:				
Email:						
NB: Our Credit Teri	ns are 14 Days fron	n date of each invo	ice.			
Monthly Credit Limit	Applied for: \$					
Please Tick where						
Premises Owned			Leased			
Business Structure	<u>):</u>					
Sole Trader			Private Company			
Partnership			Public Company			
Trustee			Incorporated Body			
Too Is/Dessions Be	•					
Trade/Business Re		Contact:				
Phone Number: ()	Address:				
Business Name:		Contact:				
Phone Number: ()	Address:				
Business Name:		Contact:				
Phone Number: ()	Address:				
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Trading Terms and Conditions

In consideration of FishCo Fish Market of 19 Dalby St, Fyshwick, in the Australian Capital Territory having, at the request of the guarantor(s), agreed to supply the business named in the credit application hereto with various FishCo Fish Market products.

The Guarantor(s) hereby jointly and severally guarantee payment to FishCo Fish Market of all monies payable by the business for all such goods supplied by FishCo FishCo Fish Market to the business.

In order to give further effect to this guarantee the guarantor(s) declare that FishCo Fish Market shall be at liberty to act as though the guarantor(s) was the principal debtor. If at any time, any monies which the business is required to pay to FishCo Fish Market for supply of goods, shall be in arrears and unpaid the guarantor shall on demand forthwith pay such monies to FishCo Fish Market including monies in excess of the credit limit.

In addition, I/We agree to pay interest to FishCo Fish Market, at the interest rate FishCo Fish Market is charged by their bank, on money that is overdue and outside the trading terms. It is agreed that all stock supplied by FishCo Fish Market remains the property of FishCo Fish Market and can be retrieved at any time until such time that all monies owed are repaid in full.

The customer shall pay any expenses, costs or disbursements incurred by FishCo Fish Market in recovery of any outstanding monies.

Full Name, Home Address <u>and Photo ID</u> of Partners/Proprietors/Directors who personally guarantee payment of this account must be provided. Please send Photo Id with signed application.

Full Name:	_Phone:
Email:	
Signature:	_Date:
Witness Signature:	Full Name:
Full Name:	_Phone:
Email:	
Signature:	
Witness Signature:	Full Name:

FISHCO FISH MARKET - CREDIT CARD AUTHORITY VOLANNE PTY LTD

ABN 90 077 412232

I authorise FISHCO PTY LTD to debit my credit card for payment of invoices as nominated below. I accept that if credit card payment is declined by my bank I will be contacted immediately and if immediate payment cannot be made, an invoice will be forwarded to me with seven (7) day payment terms.

I accept that my credit terms will be suspended until payment is received and any orders will require payment on delivery (COD) by cash or credit card over the phone.

All Credit Card payments incur a 0.7% Credit Card Surcharge.

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Date:				
Business Name:				
Authorised Person:				
Signature:			_ Note: Photo Id also re	equired.
Please select your p	referred payment terms:			
☐ Per Invoice — Plea	ase charge my credit card v	within 24hrs of receip	ot of goods and invoice.	
☐ Per Fortnight -	Please charge my credit	card on the 1 st and	15th of every Month	for the previous
fortnight's total acco	ount.			
Credit Card Details:				
Туре:	□ VISA	☐ Mastercard	<u>Please Note</u> : We do	not accept AMEX
Name on Card:				
Credit Card Number	:			
CCV:	EXPIRY:			
☐ Email my receipt	to:			

Please email this form together with photo id of directors/owners to accounts@fishco.com.au.