

**OTTA Pty Ltd** ABN: 12 115 675 557 **Unit 2, 37-39 Whyalla Pl, Prestons NSW 2170** Phone: 02 9607 5607 Fax: 02 9607 2607 **www.otta.com.au** (HACCP program endorsed company)

Credit A	Appl	lication
----------	------	----------

Registe <u>A copy</u>	ered Business Name: 7 of business or compar	ny registration must	Date R	egistered: this application.	
Austral	lian Business Number A	BN/A.C.N:			
Registe	ered business address:				
Deliver	ry Address:				
Trading	g Name (if Different from	m registered name):			
Email A	Address:		Webs	ite:	
Phone:		Fax:	Mobile:		
Bank _	Br	anch	Account Number:		
Directo	or/Owner/Partner				
1	Full Name:		home Phone:		
	Driver Lic. No	DOB:		State Issued:	
	Home Address:				
2	Full Name: home Phone:				
	Driver Lic. No	DOB:		State Issued:	
	Home Address:				
Purchas	sing contact person:		Phone:		
Accour	nt contact person:		Phone:		
Trading	g Reference:				
1	Business Name:		Phone:	Fax:	
2	Business Name:		Phone:	Fax:	
approve me/us a	ed customers. Should I/	We accept your right due, both current and	to check my/our cr l overdue, should th	day of delivery is made to edit history and claim from his become necessary through l cost and other recovery cost.	
	ame: or only)		Title:		
Signatu	ıre:		Date:		

Office use only

Processed by: \_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

We Specialised in Chicken