



QUALITY GRAPHICS & PRINT MANAGEMENT

# Account Application

Account\_App\_0706\_MYOBS.indd

**Thank you for your interest in CDQ Communication Design Limited**

**To proceed with the work:**

Please complete the attached "Conditions of Trade" and fax back to 0-9-473 2332.

Note the "Conditions of Trade" apply to all work undertaken by CDQ until further notice.

**Your Account Status:**

If you are a new client your account will be set at "Cash on Delivery".

If you would prefer to open a credit account with CDQ please complete the following application and fax to 0-9-473 2332.

Name of Business: \_\_\_\_\_ Years in Business: \_\_\_\_\_

Street Address: \_\_\_\_\_

\_\_\_\_\_ City: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile \_\_\_\_\_

Email: \_\_\_\_\_ Web: \_\_\_\_\_

Type of Business: Individual: \_\_\_\_\_ Partnership: \_\_\_\_\_ Limited Co: \_\_\_\_\_

**Owner, Partnership or Company Officers:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Address \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

**Industry References:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_