

Jig System <input type="checkbox"/> Computerised <input type="checkbox"/> Non Computerised	<input type="checkbox"/> Yes <input type="checkbox"/> No	Age: _____ yrs	<input type="checkbox"/> Lease <input type="checkbox"/> Own
Tow Trucks - Number:		Age: _____ yrs	<input type="checkbox"/> Lease <input type="checkbox"/> Own
Computer Quoting System	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> FlexiQuote <input type="checkbox"/> AutoQuote <input type="checkbox"/> Quickquote	<input type="checkbox"/> PPG <input type="checkbox"/> Other

SALES & INSURANCE COMPANY DETAILS

Average sales per month, excluding non approved work.

Total Sales Per Month (\$): _____ Percentage Intended to Factor (%): _____

Which insurance companies are you a (Preferred,Guaranteed,Authorised Repairer for? Please list.

Which Car Makers are you an approved Repairer for? Eg Subaru etc Please List.

BANKING DETAILS

Bank	Branch	Account Name
BSB		Account No.

Applicant's Declaration

PLEASE READ CAREFULLY AND SIGN

I/We hereby apply for an Smash Repairers Factoring Company factoring facility. **I/We have read and understood the particulars which have been completed in this form, and declare that they are true and complete.**

I/We hereby acknowledge and agree as follows:

Acknowledgement and consent that credit information may be given to a credit reporting agency.

I/We acknowledge that the Privacy Act (the Act) allows Smash Repairers Factoring Company to give a credit reporting agency certain personal information about me/us which I/we authorise Smash Repairers Factoring Company to do. This information includes:

- information about me/us which will allow me/us to be identified.
- the fact that I/we have applied for credit and the amount.
- the fact that Smash Repairers Factoring Company is a credit provider to me/us.
- details of payments which become overdue more than 90 days and for which collection action has commenced.
- advice that payments are no longer overdue.
- that in Smash Repairers Factoring Company's opinion I/we have committed a serious credit infringement.
- that the credit provided to me/us by Smash Repairers Factoring Company has been discharged.

Authority for Smash Repairers Factoring Company to obtain certain credit information.

To enable Smash Repairers Factoring Company to assess my/our application for commercial credit, I/we authorise Smash Repairers Factoring Company:

- to obtain from a credit reporting agency credit reports containing personal credit information about me/us and about my/our commercial activities or commercial credit worthiness.
- to obtain from my/our accountant such financial information as Smash Repairers Factoring Company may require.

Authority to exchange information with other credit providers.

I/we authorise Smash Repairers Factoring Company to give and obtain from credit providers named in this credit application and credit providers that may be named in a credit report issued by a credit reporting agency information about my/our credit arrangements including any information about my/our credit worthiness, credit standing, credit history or credit capacity that credit providers are allowed to give or received from each other under the Act.

SIGNATURE OF APPLICANT: DATE:/...../.....

SIGNATURE OF CO-APPLICANT (if applicable): DATE:/...../.....

If the applicant is a company this declaration is to be signed by each director. If the applicant is a partnership, each partner to sign.