Smash Repairers Factoring Company

ABN 75 940 185 975 PO Box 2716 Taren Point NSW 2229 Phone: 02 8515 0155 Fax: 02 8515 0157 Email: applications@factoring.com.au

APPLICATION FORM

Trading Name of Smash Repair Shop							State Business Registration No:			
Address	Street name and number									
Suburb			State	State				Postcode		
Email Address:										
Telephone				Facsimile						
TYPE OF FUNDING			<u> </u>							
General Smash Repairs Factoring Only OR General Smash Repair Factoring and Parts Funding										
OWNERSHIP DETAILS										
Type of Entity If Company, do yo				ou sign under seal? Yes / No			ABN			
Proprietor/Company Name (if applicable)							ACN			
Please supply details of Owner (if Sole Trader), Partners (if Partnership), Directors (if Company):										
		Owi	ner/Partne	er/Director 1	Owner/Partner/Director 2			Owner/Partner/Director 3		
Owner's/Partner's/Director's	Name									
Home Address										
Residential Status		Own Home Rent			Own Home Re		Rent		Own Home D Rent	
Home Phone No.										
Position in Company										
Date of Birth										
Driver's Licence No.										
Years in Current Business										
Years Management Experier Shop Industry	ice In Panel									
BUSINESS DETAILS										
Current business existing for			Years	Years Total Number of Staff						
The position of outstanding ta	axes at:									
GST	Current O	wing		\$		Overdue	erdue Owing		\$	
Group Tax	Current O	Current Owing		\$		Overdue Owing			\$	
Manager's Name				Person to contact about paperwork						
PROPERTY AND EQUIPMENT DETAILS										
Size of premises		m2	🗆 Le	ease 🗆] Own					
Booth / Oven	□ Yes	🗆 No	Age:		yrs			ease	D Own	

Jig System Yes No Computerised Non Computerised Tow Trucks - Number: Age: yrs Lease Own Computer Quoting System Yes Yes No SALES & INSURANCE COMPANY DETAILS Average sales per month, excluding non approved work.											
Tow Trucks - Number: Age: yrs Lease Own Computer Quoting System Yes No FlexiQuote Quickquote PPG Other SALES & INSURANCE COMPANY DETAILS											
Computer Quoting System Yes No Image: FlexiQuote Quickquote Image: PPG Image: Other SALES & INSURANCE COMPANY DETAILS											
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 (Prefered, 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	Account Name										
BSB Account No.	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 is 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 to obtain certain credit information. to enable 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 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 											
 to obtain from a credit reporting agency credit reports containing personal credit information about mercial 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:/											
OF CO-APPLICANT (if applicable):											