## PAYMENT BEFORE DELIVERY (PBD) ACCOUNT APPLICATION

Applicant:				(Sole	Trader/	'Comp	any N	ame
Trading Name:						. (Trad	ding N	ame
ABN:								
Date://	(DD/MM/YYYY)							
Account Contact:			Pos	ition:				
CONTACT DETAILS	<u>8:</u>							
Registered Office/Pri	ncipal Place of Business	s:						
Business/Delivery Ac	ldress (if different from reg	gistered of	fice):					
			•	-				
Email:								
□ I request you NETA	TIRE SERVICE AND SAL	ES to arra	nge for fur	nds to h	e dehite	d fron	n mv	
nominated creditcard a	according to the schedule s	pecified al	bove and a	attache	d Direct	Debit	Servi	е
		8 8	8 8	8 3	. 26	3	86 3 k	95
Credit Card Number:								
Expiry Date:	M M / Y Y							
Cardholder Name:								
Signature:			Date:					
				8.9				
C	41							
Completed Applica								
Return your completed	application by:-							
Email:	admin@neta.com.a	au						

