Trade Direct Wholesale:
E: accounts.auckland@tradedirect
accounts.hamilton@tradedirect.nz
accounts.christchurch@tradedirect.nz

Trade Direct Wholesale
AUCKLAND

Drywall Direct Wholesale
HAMILTON

Trade Direct Wholesale
CHRISTCHURCH

SECTION A: Customer Details	
WHAT CAPACITY ARE YOU APPLYING FOR A TRADE CASH ACCOUNT	
☐ Company	Please complete all sections
☐ Individual/Sole Trader	Please complete all sections
COMPANY / INDIVIDUAL / PARTNERSHIP NAME	
Company / Name	
Individual Name	First Name Middle Name Last Name
Trading Name	
Company Registration Number	
COMPANY / PERSONAL POSTAL ADDRESS	
Street Number and Name	
PO Box	
Suburb / City	
Post Code	
DELIVERY ADDRESS (LEAVE BLANK IF SAME AS POSTAL ADDRESS)	
Street Number and Name	
Suburb / City	
Post Code	
COMPANY / PERSONAL CONTACT DETAILS	
Email Address	
Phone / Fax	
FINANCIALS	
Anticipated Monthly Spend	$
SECTION B: Limited Liability Company Director / Shareholder Details	
CONTACT 1	
Name	First Name Middle Name Last Name
Address (Residential)	Street No Street Name City
Phone / Mobile Number	

Email Address	

CONTACT 2			
Name	First Name	Middle Name	Last Name
Address (Residential)	Street No	Street Name	City
Phone / Mobile Number			
Email Address			

TERMS AND CONDITIONS

Please read the Terms and Conditions section of this agreement. Trade Direct Wholesale will inform all applicants of either the acceptance or rejection of the application for a cash account by written correspondence. All correspondence will be sent by way of email, post and phone call. All addresses physical, postal or electronic provided within all the Account Application document(s) are and will be used as addresses for service. If any applicants' details change then it is the sole responsibility of the applicants (customers) to inform Trade Direct Wholesale immediately of these changes. It is also be the sole responsibility of the Customer to supervise the usage of the account and who uses it.

CUSTOMER AGREEMENT

SIGNATURE	NAME	TITLE / POSITION	DATE

OFFICE USE – Yard / Warehouse Staff	
All relevant sections are complete	☐
All boxes are filled out correctly	☐
Full names and DOB's are included	☐
Document signed	☐
RECEIVED AND CHECKED BY	
Signature:	
Name:	
Date:	

OFFICE USE – Manager Sign Off	
Application Checked in full	☐
Document signed	☐
PRICING	
Trade Type (Plastering, Painting, Tiling etc)	
Pricing Level Required (Trade, T1A, T1, T2 etc)	
Pricing Matrix Required (if relevant)	
MANAGER	
Signature:	
Name:	
Date:	

OFFICE USE – Accounts Administrator	
All relevant sections are complete	☐
All boxes are filled out correctly	☐
Full names and DOB's are included	☐
Application has been checked off and signed by Yard / Warehouse Team Member	☐
Application has been checked off and signed by Manager	☐
Account has been opened on MYOB Exo or MYOB Account Right	☐
Contacts have been added to Customer Card	☐
Customer has been advised of account being opened	☐
Manager and Sales Manager have been advised of account being opened or declined	☐

MANAGER	
Signature:	
Name:	
Date:	