



Leonora Laverton Assay Laboratory Pty Ltd ABN 44 009 426 359

Credit Account Application Form

Please complete and return

Name of Applicant			
Postal Address			
ABN		ACN	
Bank		Branch	
We Wish to make Payments Electronically	Yes	No	
Our Company Uses Purchase Order Numbers	Yes	No	
Contact Person			
Telephone		Fax	
Mobile		E-Mail	
Directors	Name	Address	
1.			
2.			
3.			

Leonora Laverton Assay Laboratory Pty Ltd ABN 44 009 426 359

Kalgoorlie Assay Laboratory
 20 Cunningham Road
Kalgoorlie WA 6430
 Ph: (08) 9091 7227
 Fax: (08) 9091 7228
 kalgoorlie@assay.com.au

Leonora Laverton Assay Laboratory
 Lot 1105 Rajah Street
Leonora WA 6438
 Ph: (08) 9037 6160
 Fax: (08) 9037 6270
 leonora@assay.com.au

Yilgarn Assay Laboratory
 Lot 711 Arcturus Street
Southern Cross WA 6426
 Ph: (08) 9049 1511
 Fax: (08) 9049 1330
 yilgarn@assay.com.au



Signature of Authorised Company Representative	
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Position		Name	
Date			

1. The applicant hereby applies to Leonora Laverton Assay Laboratory Pty Ltd (LLAL) for a credit account.
2. By signing this credit application, we the above agree to abide by 30 day the trading terms of LLAL. If we fail to meet our credit obligations we recognise that LLAL will place a STOP CREDIT on our account until we are again within the 30 day trading terms.
3. We also recognise that LLAL have the right to charge commercial interest rates on amounts outstanding beyond these trading terms.
4. We also agree that LLAL will bill any costs associated with debt recovery to our account.

Please fax to (08) 9091 7228

Office Use Only

Account Code	
Account Name	
Assigned Manager	
Data Entry Date	
Data Entry Operator	

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