

I.STORE (CT&T) COMPUTERS

149 SPRINGVALE ROAD,
NUNAWADING, VIC 3131
TEL: (03) 9894 8466
FAX: (03) 9894 7781

388 LONSDALE STREET,
MELBOURNE, VIC 3000
TEL: (03) 9670 9686
FAX: (03) 9670 9687

DEALER APPLICATION FORM

CUSTOMER HISTORY (ALL CUSTOMERS TO COMPLETE)

Company Name: _____ ABN NO: _____

Trading As: _____

Address: _____ Post Code: _____

Phone No.: _____ Fax No.: _____

Email address: _____

Registered Office: _____ (a copy of Business Registration is required)

Business Style: Sole Trader Partnership Pty. Ltd. without trust
 Trust Public Co

Business Address: Owned Leased

Date of Incorporation: _____ / _____ / _____

Name(s) and Address(s) of Sole Trader, Partners, Directors and Spouses.

Full Name: _____ Full Name: _____

Address: _____

State: _____ Post code: _____

Phone No: _____ Phone No: _____

Please state whether applicant is trustee for any trust

Full name of Trust _____

Customers to supply a copy of memorandum and articles of association and copy of stamped trust deed with this application.

Trade References (Please supply at least 3 Computer Supplier references, other than Associated Companies)

Company: _____ Phone No: _____

Contact Person: _____

Company: _____ Phone No: _____

Contact Person: _____

Company: _____ Phone No: _____

Contact Person: _____

The information I have given is said to be TRUE otherwise IStore(CT &T) Computers may refuse your application.

Signature: _____ Date: _____ / _____ / _____

Name (Please print): _____