

Credit Application

Application of credit terms for express releasing of shipment without payment on ocean freight & local charges excluding GST charges

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:	Accounts Fax No :	
:	Accounts Manager : Email	
:	Business UEN No	
:	Requested Limit	
:	Paid–Up Capital	
:	Financial Year	
:	Branch :	
:	USD Account No	
rietors:		
Job Title		Shareholding Percentage
-		
	: : : : : : : : : : : : : :	Accounts Manager Email Business UEN No Requested Limit Paid–Up Capital Financial Year Branch USD Account No

We wish to apply for a thirty (30) days credit term for an extendable one year validity and will comply to clearing of outstanding accounts within thirty (30) days from date of invoice when this credit application is approved. However it is hereby agreed that upon such time where outstanding amount exceeded the approved credit limited granted, immediate clearing of outstanding amount is required even they are not due and/or overdue.

We fully understand that this credit facility granted is subjected to Mainfreight's regular periodical and/or random credit review adjustment where deem fit and shall accept the fact that approved credit facility can be suspended without further notice if outstanding amount is not cleared by due date after Mainfreight's reasonable effort is made to recover them. In this respect, we will also agree to reimburse Mainfreight for all legal fees, intermediary and handling fees incurred during the course of recovery of outstanding amount with interest charged at 1.0% per month on remaining unpaid amount where such a time arises.

We will also further agree to the terms & conditions pre-printed on Mainfreight's bill of lading issued where in the event of cargoes claim arises, we will not entitle to exercise any rights to hold any outstanding amount due to Mainfreight. It is hereby also agreed that with our authorization, Mainfreight has the right to exercise all rights of lien over the cargoes in respect of our overdue unpaid accounts due to Mainfreight and whether or not such unpaid accounts may be relevant to direct or indirect shipments will also be allowed in this exercise.

We certify that all information given above is true and correct.		
Company Name	Company Stamp	
Name & Designation :	Authorized Signature (To be signed by Director only)	
Tel / Fax :		
Email Address :	Date:	

For Official Use Only		
Approved/Not Approved	Credit Limit	
Approving Officer Date	Name & Designation	