

CAPITAL FLORIST LTD

Capital On The Quay, Level 1, 250 Lambton Quay, Wellington 6011

Email: sales@capitalflorist.co.nz Ph: (04) 4711 819

Trading Name:

Registered Company Name:

Registered Company Number:

Address:

Email:

Ph: Mobile:

Account Person Name:

Accounts Person Email:

Accounts Person Phone:

Type of Business:

WWW:

Ownership: (Please insert Owner(s) / Director(s) name(s) in full)

1. Name: Mobile#:

Residential Address:

2. Name: Mobile#:

Residential Address:

Financial and Professional Advisors:

Name of Solicitor:

Name of Accountant:

Bank: Branch:

Credit Referees

1. Company Contact

2. Company Contact

Unless expressly altered or modified in writing by Capital Florist Ltd (the Company), the following terms and conditions shall be deemed incorporated into and form part of the acceptance by the Company of any contracts whereby the Company supplies any good or services (the 'Goods') to any person (the 'customer').

Payment and Interest:

1. The customer shall make full payment for all goods supplied by the Company strictly on or before the 20th day of the next month following the day in which the Goods are invoiced (the due date).

Account name: **Capital Florist Ltd**

Bank: BNZ

Account Number: **02-0524-0215758-000**

2. In the event that the Customer does not make payment in accordance with clause 1(a) hereof, the Company reserves the right to:
 - i. Charge interest at the rate equal to 2.5% per annum over the overdraft rate payable by the Company to its bank at the time of supply of Goods, calculated on a daily basis from the Due Date of actual payment: and
 - ii. Recover all costs and disbursements incurred by the Company seeking recovery of the monies due, including legal fees, any debt collecting fees, and all other expenses incurred by the Company.
3. The Company may at any time after the Customers receive the Goods demand immediate payment if the Company considers the Customer to be a risk.

Customer Acceptance:

I/W

Confirm that the information provided is true and correct

Agree to be bound by all terms and conditions

Accept that I am authorized by the customer (Company) to enter into such contracts

Accept that I personally guarantee the payment of all monies owing

Signature:
(Director or Authorised personal on behalf of Director(s))

Name:

Date:

Position: