

**DENTSPLY SIRONA SA (PTY) LTD APPLICATION FOR TRADE CREDIT FACILITY BY JURISTIC PERSONS IN TERMS OF A CREDIT LIMIT FACILITY (ON A CREDIT MANAGEMENT FOUNDATION)**

**PART A: TO BE COMPLETED BY JURISTIC PERSONS (PARTNERSHIPS / COMPANIES / CC's/ INC./PTY / LTD)**

**BUSINESS DETAILS**

BUSINESS REGISTERED NAME:						
TRADING NAME:						
PREVIOUS REGISTERED NAME:						
INCORPORATED FORM OF BUSINESS	<input type="checkbox"/>	PRIVATE COMPANY	<input type="checkbox"/>	PUBLIC COMPANY	<input type="checkbox"/>	PARTNERSHIP
	<input type="checkbox"/>	CLOSE CORPORATION	<input type="checkbox"/>	OTHER (SPECIFY)	<input type="checkbox"/>	
COMPANY REGISTRATION NO.						
VAT REGISTRATION NO.						

**DETAILS OF PERSON RESPONSIBLE FOR COURIER COLLECTION/DELIVERIES – CONTACT PERSON RESPONSIBLE FOR**

FOR COLLECTION / DELIVERIES	FULL NAME	TELEPHONE	EMAIL ADDRESS	
FOR PAYMENT OF ACCOUNT	FULL NAME	TELEPHONE	EMAIL ADDRESS	
PHYSICAL ADDRESS OF BUSINESS - 1				
DELIVERY TO ADDRESS - 2				
POSTAL ADDRESS OF BUSINESS - 3				
PREMISES	<input type="checkbox"/>	OWNED	<input type="checkbox"/>	LEASED
NAME OF LANDLORD	NAME	TELEPHONE	EMAIL	

**PARTICULARS OF ACCOUNTABLE PRINCIPLES TO BE LISTED AND COMPLETED IN FULL THE TWO MOST SENIOR IN THE COMPANY**

DETAILS OF	DIRECTORS - HOW MANY?		MEMBERS -		PARTNERS -	
FULL NAME						
ID NUMBER OR PASSPORT NO.						
FULL NAME						
ID NUMBER OR PASSPORT NO.						

**BUSINESS CREDIT INFORMATION**

AUDITORS / FINANCIAL OFFICER	NAME	TELEPHONE	EMAIL

**Please tick the correct answer**

Has the Directors or company / cc issued / signed any guarantees in favour of other creditors?	Yes	No
Have the principals ever been directors / members of a business that ceased trading?	Yes	No
Have your books ever been ceded? If yes, what date did your book debts cede?	Yes	No

**Credit history of the applicant**

Do you have any judgements or adverse information listed?	Yes	No
Do you have any Trade Credit Agreements that are currently in arrears?	Yes	No
Do you have adverse credit information listed against you at a credit bureau or received any notices of another credit provider's intention to do so?	Yes	No
Do you have any judgments listed against you at a credit bureau or has any other credit provider instituted legal action against you in any court?	Yes	No

**TRADE REFERENCES (PLEASE PROVIDE DETAILS OF CONTACTABLE LAND-LINE NUMBERS FOR BUSINESS WITH WHOM YOU CURRENTLY TRADE WITH, EQUIVELANT TO THE VALUE OF THE CREDIT FACILITIES REQUIRED)**

COMPANY NAME IN FULL	TELEPHONE NUMBER:	ACCOUNT NUMBER:	EMAIL ADDRESS :
COMPANY NAME IN FULL	TELEPHONE NUMBER:	ACCOUNT NUMBER:	EMAIL ADDRESS :
COMPANY NAME IN FULL	TELEPHONE NUMBER:	ACCOUNT NUMBER:	EMAIL ADDRESS :

**ASSETS AND ANNUAL TURNOVER OF THE BUSINESS (JURISTIC PERSON) REGARDING THE CONSUMER PROTECTION ACT 68 OF 2008.**

For the purposes of the Consumer Protection Act 68 of 2008 sections 5(2) (b) and 6 please reveal the following of your business in terms of the said Act read with Government Gazette Notice 294 with GG34181 dated 1 April 2011 by marking the relevant box(s) with an "X".

ASSET VALUE	OVER R2 MILLION		UNDER R2 MILLION	
ANNUAL TURNOVER	OVER R2 MILLION		UNDER R2 MILLION	

**ASSETS AND ANNUAL TURNOVER OF THE BUSINESS (JURISTIC PERSON) FOR THE PURPOSES OF THE NATIONAL CREDIT ACT 34 OF 2005.**

For the purposes of the National Credit Act 34 of 2005 sections 4(1)(a)(i) and 7(1)(a) please reveal the following of your business in terms of section 4(2)(a) of the said Act read with Government Gazette Notice 713 of 2006 by marking the relevant box(s) with a "X".

ASSET VALUE	OVER R1 MILLION		UNDER R1 MILLION	
ANNUAL TURNOVER	OVER R1 MILLION		UNDER R1 MILLION	
CAN THE LATEST AUDITED FINANCIAL STATEMENTS OR MANAGEMENT ACCOUNTS BE MADE AVAILABLE?	YES		NO	WHAT YEAR? (YYYY)

**PLEASE SPECIFY CREDIT LIMIT REQUIRED BY THE APPLICANT – PLEASE NOTE THAT ON THE TRADING ACCOUNT – CREDIT TERMS ARE STRICTLY 60 DAYS NETT FROM DATE OF INVOICE**

CREDIT LIMIT REQUIRED FOR TRADING ACCOUNT – STRICTLY 60 DAYS NETT FROM DATE OF INVOICE	VALUE R _____ AMOUNT IN WORDS _____
--	-------------------------------------

**I THE APPLICANT (CONSUMER) HEREBY CERTIFY THAT ALL INFORMATION SUPPLIED IS TRUE AND CORRECT, AND HEREBY INDICATE THAT I AM DULY AUTHORISED TO SIGN ON BEHALF OF THE APPLICANT THIS CREDIT APPLICATION, AND TO DULY BIND THE APPLICANT TO THIS HERESAID AGREEMENT, ACKNOWLEDGEMENT, CERTIFICATION, CONSENT AND AUTHORISATION BY THE CREDIT APPLICANT (TO BE READ AND UNDERSTOOD BY THE CONSUMER BEFORE SIGNING THIS APPLICATION FOR CREDIT)**

1. The application hereby certifies that the information submitted by it and recorded in this application for credit is true and correct in every detail.
2. The applicant hereby irrevocably authorises and agrees and consents that the credit provider Dentsply Sirona SA (Pty) Ltd may deal with its personal information as follows:
  - 2.1 The applicant hereby consents to the storage and use by Dentsply Sirona SA (Pty) Ltd of the personal information that it has provided to Dentsply Sirona SA (Pty) Ltd for establishing its credit rating and to Dentsply Sirona SA (Pty) Ltd for disclosing such information to Credit Control Companies, Banks and other institutions involved in rating credit. In specific the applicant hereby agrees to consent to the following: In terms of setting a limit of service provision in respect of any continuous service; Assessing an application for insurance; Verifying educational qualifications and employment; Tracing the applicant by Dentsply Sirona SA (Pty) Ltd in respect of a Trade Credit Agreement entered into between the applicant and Dentsply Sirona SA (Pty) Ltd.
3. The applicant acknowledges that it has been made aware that the details of the manner in which its account is conducted and repaid, will be Provided to the credit bureau.
4. The applicant herewith also acknowledges that this application is based on a term of 60 Days Net from date of invoice.

SIGNED BY AN DIRECTOR/OWNER OR MANDATED SIGNATORY:	PLACE:	DATE:	TIME:
FULL NAME OF SIGNATORY:	DESIGNATION OF SIGNATORY:		