

OFFICE USE ONLY

Account Code _____

VIP CUSTOMER APPLICATION

Please complete this application in block letters and post, email, or hand it to one of our staff members.

Mr / Mrs / Miss / Ms (please circle one)

First Name(s): _____ Last Name: _____

Business Name: _____

Home Phone: _____ Mobile: _____

Delivery Address*: _____ City: _____ Postcode: _____

Postal Address: _____ City: _____ Postcode: _____

Email Address: _____

How did you hear about Linkup? _____

Terms and Conditions: Customers must abide to the terms and conditions, and any amendments to the Linkup VIP Customer Account.

Under the terms of the Privacy Act 2020, the applicant acknowledges that by accepting a Linkup VIP Customer Account, the account holder agrees to have their contact details held by Linkup Paint Supplies Ltd. The customer hereby authorises the credit provider to obtain information as the credit provider may reasonably require from any source including credit reference agencies.

If payment is not received by the credit provider by the said date, the credit providers' debt collection agency may charge the customer a fee equal to 25% of the unpaid portion of this invoice, but not less than \$25-00. Where the total agency, legal and other costs arising from recovery of any amount owing exceeds, the debt recovery charged, the debt collection agency is also entitled to recover any such additional costs from the customer. The credit provider reserves the right to pass these costs on to the customer and the customer hereby agrees to pay the said costs of payment if not made by the said date.

In the event of dishonoured cheques, collection fees will incur as per your signed VIP Application form.

From time to time we may send information to you including, but not limited to, texts and/or emails regarding your orders or current promotion. VIP card purchases do not receive discount off promotional products or items that are already discounted. Discounts apply to cash or credit card only.

By signing below, you agree to these terms and conditions.

SIGNED: _____ Date: ____ / ____ / ____

FOR OFFICE USE ONLY:

Form Issued By: _____ Branch: _____ Date: ____ / ____ / ____

Approved / Declined By: _____ Date: ____ / ____ / ____

Account Code: _____

B: L: Address(es) Loaded into eDispatchIT:

**Please request a copy of the "Additional Delivery Addresses" form to submit more delivery addresses.*

Linkup Paint Supplies Ltd.
6 Killarney Lane, Frankton, Hamilton 3204
PO Box 15039, Dinsdale, Hamilton 3243

N.B.: Completion of this form does not guarantee acceptance.

Shop: 07 847 0933
Accounts: 07 847 0933
Email: accountsreceivable@linkup.co.nz

