



# UNI WORLD VISION PVT. LTD.

OFFICE ADDRESS. 1ST FLOOR NATHUNI PLACE KANKARBAGH

COLONY MORE PATNA 800020

CONTACT DETAILS:- 7677457804 / 9204057804 / 9204057803

## CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION			
Title		Date business commenced	PHOTO
Company name		Sole proprietorship	
Phone   Fax		Partnership	
E-mail		Corporation	
Registered company address City, State ZIP Code		PVT LTD	
BUSINESS AND CREDIT INFORMATION			
GST NO :(-Attach copy)		Bank name:	
PAN NO. (Attach Copy)		Account number	
BANK STATEMENT LAST 3 MONTH (ATTACH COPY)		Type of account	
SECURITY CHQUE NO.			
PERSONAL INFORMATION FOR ALL DIRECTORS AND PARTNERS			
NAME OF PROPRIETOR		NAME OF PROPRIETOR	
ADRESS		ADRESS	
PAN NO.		PAN NO.	
ADHAR NO. (Attach copy)		ADHAR NO. (Attach copy)	
DATH OF BIRTH		DATH OF BIRTH	
BUSINESS/TRADE REFERENCES			
Company name		Phone	
Address		Fax	
City, State ZIP Code		E-mail	
AGREEMENT			

1. All invoices are to be paid 21 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize UNI WORLD VISION PVT. LTD. to make inquiries into the banking and business/trade references that you have supplied.
4. We agree to accept the Credit Limits as sanctioned to us and will abide with your credit Policy.
5. We shall provide Security and PDC before each Billings as per UNI WORLD VISION PVT. LTD. Policy.
6. We agree to pay Interest on delayed payment @24% p.a. and Cheque return charges Rs.500/- per return Instrument.

## CHECK LIST ATTACHEMENT .

1. COPY OF GST NO.
2. COPY OF PAN NO.
3. COPY OF ADHAR NO.
4. COPY OF LAST 3 MONTH BANK STATEMENT

### SIGNATURES

Signature		Signature	
Name and Title		Name and Title	
Date		Date	

### FOR OFFICE USE ONLY

- 1 BRANCH \_\_\_\_\_
- 2 SALES REPRESENTATIVE NAME \_\_\_\_\_
- 3 BRANCH HEAD \_\_\_\_\_
- 4 RECOMMENDED LIMIT (RS) \_\_\_\_\_
- 5 RECOMMENDED CREDIT DAYS \_\_\_\_\_
- 6 CREDIT GIVEN BY OTHER DISTRIBUTORS \_\_\_\_\_
- 7 MARKET REFERENCE \_\_\_\_\_
- 8 REMARKS \_\_\_\_\_
- 9 CO REMARK \_\_\_\_\_
- 10 Security Cheque no. \_\_\_\_\_ Bank Name : \_\_\_\_\_