



Email: sales@armstrongae.com URL:www.armstrongae.com

**FINANCIAL CREDIT APPLICATION FORM**

**STEP 1: Choose Your Package:**  Project Financing  Trading Credit Line  Venture Capital

**STEP 2: Tell Us About Yourself: (please provide information similar to tax assessment document)**

1 COMPANY NAME (legal name) : \_\_\_\_\_

2 BUSINESS ADDRESS : \_\_\_\_\_  
(Country,City,Zip, Municipal District)

3 REGISTERED ADDRESS : \_\_\_\_\_  
(Country,City,Municipal District)

4 PHONE NUMBER : \_\_\_\_\_

5 FAX NUMBER : \_\_\_\_\_

6 DATE OF INCORPORATION : \_\_\_\_\_

7 NATURE OF BUSINESS or : \_\_\_\_\_  
PROPOSED PROJECT REF CODE : \_\_\_\_\_

8 CONSTITUTION:

CORPORATION

Please enclose copies of the following: -

a. Certificate of Incorporation

d. Audited Financial Report

AUTHORIZED CAPITAL USD \_\_\_\_\_

PAID-UP CAPITAL USD \_\_\_\_\_

PARTNERSHIP

SOLE PROPRIETORSHIP (SSN)

9 PARTICULARS OF PRINCIPAL OFFICER, GENERAL PARTNER, GRANTOR, OWNER, or TRUSTOR: -

NAME	SOCIAL SECURITY / NRIC.	DESIGNATION

10 PERSON(S) AUTHORIZED TO OPERATE OR RESPONSIBLE FOR PURCHASE ORDER/ QUOTATION

NAME	POSITION	SOCIAL SECURITY / NRIC	SPECIMEN SIGNATURE

11 AVERAGE MONTHLY SALES TURNOVER: - USD \_\_\_\_\_

Business On Cash: \_\_\_\_\_ %

Business On Credit: \_\_\_\_\_ %

Credit Terms offered to customers: \_\_\_\_\_ Days



**12 TRADE REFERENCES: -**

NAME	CREDIT LIMIT	CREDIT TERM
	USD	
	USD	
	USD	

**13 BANK REFERENCE**

BANK	ADDRESS	TYPE OF FACILITIES

(Please enclose copies of the latest Bank Account Statements)

14 AMOUNT OF FINANCING / CREDIT APPLIED FOR: USD \_\_\_\_\_

**CREDIT TERMS AND CONDITIONS GOVERNING CREDIT ACCOUNTS WITH ARMSTRONG AE. GROUP OF COMPANIES**

- 1 I/We confirm that the person(s) named above are authorized to operate the account.
- 2 I/We authorize you to make any queries you may deem necessary in connection with this application form whatever source you may choose without reference to us.
- 3 All purchases of Merchandise and Services on a Credit basis are due and payable according to the "Due Dates" from the date of Invoices.
- 4 Armstrong AE reserves the right to withdraw any credit facility extended if the credit account is not conducted by the account holder in the manner that conform to the agreed upon credit limit and payment due date.
- 5 Armstrong AE reserves the right to charge interest on overdue amount at the rate of 1.5% per month.
- 6 The credit limit extended may be reviewed at any time, and Armstrong AE reserves the right to change the credit limit at its absolute discretion.
- 7 All expenses incurred by Armstrong AE in collecting monies due are to be borne by the credit account customer. Such expenses include legal fees and the collecting agent's fees.
- 8 It is the duty of the credit account customer to advise Armstrong AE., in writing, of any change of address and of changes in the Business Particulars.
- 9 All cheques made payable to respective Armstrong AE Group of Companies
- 10 NOTES
  - a) Non-submission of requested documents will cause this credit application to be rejected.
  - b) Additional information may be included as attachments.

I/We undertake to abide by the terms and conditions as may be fixed by Armstrong AE from time to time.

We hereby certify that all information stated above are true and correct and if this application for credit is approved, all merchandise and services purchased will be paid for promptly when due.

**STEP 3: Sign on the dotted line**

**CONFIRMED BY CUSTOMER:**

**CUSTOMER'S SIGNATURE** : \_\_\_\_\_  
**NAME** : \_\_\_\_\_  
**DESIGNATION** : \_\_\_\_\_

**COMPANY'S STAMP** : \_\_\_\_\_  
**DATE** : \_\_\_\_\_

**A. To Be Completed By Office**

- 1 Customer's Current Average Monthly Purchases
  - a) From Armstrong AE USD \_\_\_\_\_
  - b) From Other Suppliers on Credit & Cash USD \_\_\_\_\_
- 2 Expected Average Monthly Purchase from Armstong USD \_\_\_\_\_
- 3 Known Payment Habits: \_\_\_\_\_ Days
- 4 Directors/ Partners/ Proprietor Associated with any Companies/ Busines having Account with Armstrong AE -

No  
 Yes. They are: -

Name of Person & Position	Name of Company/ Business	Payments on Cash/ Credit

- 5 Comments on Customer's Shop Premises (*please include photo-images relevant to credit evaluation*):
  - a) Location \_\_\_\_\_
  - b) Condition \_\_\_\_\_
- 6 Comments in Customer's
  - a) Reputation in the market \_\_\_\_\_
  - b) Growth potential \_\_\_\_\_
  - c) Credit Term extended to Customers \_\_\_\_\_

**B. ADDITIONAL COMMENTS:-**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I Confirm that I have to the best of my ability abd verified the information provided by the customer.

**Recommended by**

(Signature) \_\_\_\_\_  
**Name:** \_\_\_\_\_  
**Designation:** \_\_\_\_\_  
**Department:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

**Recommended**  
**Credit Limit:** \_\_\_\_\_  
**Credit Term:** \_\_\_\_\_

1 Total Sales Amounted f USD \_\_\_\_\_ As At \_\_\_\_\_

2 Comments by Credit Personnel:  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
**Signature**  
**Name:** \_\_\_\_\_  
**Designation:** \_\_\_\_\_  
**Date:** \_\_\_\_\_  
**Approved by:**

\_\_\_\_\_  
 (Director Signature)

**Credit Limit:** \_\_\_\_\_  
**Credit Term:** \_\_\_\_\_  
**Conditions:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
**Designation:** \_\_\_\_\_  
**Date:** \_\_\_\_\_