

APPLICATION FOR CASH ACCOUNT

Fax directly to Accounts Dept: (09) 274 2041
Or email to accounts@hafele.co.nz



Trading Company Name

Postal and Invoice Address

Suburb / Town

 Post Code

Delivery Address (if different from postal/invoice)

Suburb / Town

 Post Code

BUSINESS CONTACT DETAILS

Main Telephone

Main Email Address

Fax Number

CONTACT PERSON-ACCOUNTS

Name Mr/Mrs/Ms

Email Address*

Phone Number

**Please note all invoices and statements will be emailed to this contact (physical copies are not posted)*

CONTACT PERSON-PURCHASING

Name Mr/Mrs/Ms

Email Address*

Phone Number

**Promotional emails may also be sent to this contact*

Please describe your main business

FOR INTERNAL USE ONLY

Account Number

 Rep Code

 Code

 Business Class

Date / / Created / Amended