

# CREDIT APPLICATION FORM: TOPSHELL (PTY) LTD

PO Box 12590  
Die Boord  
Stellenbosch, 7613  
Tel: 076 770 4500  
Fax: 086 216 3413  
E-mail: rental@topshell.co.za



Please note: All panels must be completed in Capital letters  
All panels that that does not apply, must be marked with: N/A

Name & Surname:

ID Number:

**Please include copy of ID with application form**

Physical address:

Cell Number:   
Telephone No:   
Fax No:

Postal code:

E-Mail address:

Person responsible for account payments:

Postal Address:

Banking Details: Bank:   
Account number:

Branch Code:

**PLEASE NOTE: All invoices are strictly payable in advance.**

All transactions between yourselves and Topshell shall be subject to the standard Topshell Terms and Conditions which appear on the overleaf of each Delivery Note and which is also available on request.

## WARRANTY / SURETYSHIP

I, the undersigned, hereby warrant that I am the Proprietor / a Director / a Member of the applicant and that I am duly authorised to sign on behalve of the applicant and have read and agree to the conditions of the Rental Agreement.

Signed on .....day of the month of ....., year 20..... at .....

Full Name:

Signature:

Date:

Name of Witness:

Signature: