



**CREEK LIVESTOCK** : ABN 24 617 167 245  
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## CLIENT APPLICATION FORM

Date: \_\_\_\_\_

Surname: \_\_\_\_\_

Given Name (s): \_\_\_\_\_ Spouse: \_\_\_\_\_

Trading Name: \_\_\_\_\_

Residential Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Postal Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Mobile: \_\_\_\_\_ Mobile 2: \_\_\_\_\_

Email: \_\_\_\_\_

Email 2: \_\_\_\_\_

ABN: \_\_\_\_\_ GST Registered:  YES  NO

PIC / TAG: \_\_\_\_\_ LPA Number (if applicable): \_\_\_\_\_

MSA Number (if applicable): \_\_\_\_\_ Do you require Transit Insurance:  YES  NO

Other Details: \_\_\_\_\_

### PAYMENT DETAILS

Payment Preference:  Cheque  EFT (Electronic Funds Transfer)

Account Name: \_\_\_\_\_

Bank: \_\_\_\_\_ Branch: \_\_\_\_\_

BSB: \_\_\_\_\_ Account #: \_\_\_\_\_

**\*\*\*\* All payments for purchases are strictly 7 days and all stock remains the property of Creek Livestock Pty Ltd until paid in full \*\*\*\***

I, \_\_\_\_\_ state that this information is true and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office use only	
Account Code:	File Created & Form Saved?
Agent:	Commission Rate:
Date Entered:	By:
Checked by Office Manager:	