

TINY'S SANDWICH BAR

Clarence St.

CORPORATE ACCOUNT APPLICATION FORM

COMPANY INFORMATION

Company Name: _____ ABN: _____
Street Address: _____
Suburb: _____ Post Code: _____

CONTACT INFORMATION

First Name: _____ Surname: _____
Email: _____ Mobile: _____

PAYMENT DETAILS

Payment Method: Credit/debit card Electronic funds transfer

Third Party Authorisation

Card Holder Name: _____
Card Number: _____
Expiry Month: _____ Expiry Year: _____

I agree to the Terms as outlined below and consent to Tiny's Sandwich Bar using the above card details to charge the balance of the account.

Signature: _____ Date: _____

TERMS

Please notify our restaurant manager of any limits to be imposed on the account or if the account is only available to the use of select staff members.

Credit card details are required to secure all accounts, including those paid by electronic funds transfer. Invoices will be created for accounts paying via electronic funds transfer. Invoices may be created for those paying by credit or debit card upon request.

All new accounts will be charged on a fortnightly basis. Accounts may be charged monthly after 3 consecutive months of trading with Tiny's Sandwich Bar.

Please return this completed form to our restaurant manager at info@tinysandwichbar.com.au. For more information you can reach us at 02 9299 9155.