



ACE BIN HIRE NEW CLIENT FORM

Your business name: _____

Your business contact phone no: _____

Your business address: _____

Your business postal address: (if different to above)

Your business website: _____

Your business ABN: _____

Your name: _____

Your contact phone no: (if different to business) _____

Your contact email: _____

Accounts payable contact phone: _____

Accounts payable contact email: _____

Your payment method	
Credit card	
Bank Transfer	
Cheque	
Cash	

Payment Cycle
7 days from date of invoice
If other, please specify your terms in space provided for consideration:

ACCOUNT TERMS

LATE PAYMENT FEE \$44.00, AT CLIENT'S EXPENSE

INVOICES OVERDUE BY 14 DAYS FORWARDED TO COLLECTIONS.

ACCOUNT TERMS: PAYMENT WITHIN 7 DAYS OF INVOICE. ACCOUNTS ON 30 DAYS AFTER EOM ARE APPROVED ON A "CASE BY CASE" BASIS, SUBJECT TO REFERENCE CHECKS. CREDIT LIMIT IS CAPPED AT \$2,000.00.

FOR MORE INFORMATION PLEASE CONTACT OUR OFFICE 03 9551 3225.