



Altech Computers Corporation Pty. Ltd.
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 Silverwater, NSW, 2128
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DEALER APPLICATION FORM

Registered business name: **Communis PTY LTD**

Trading as:

Business address: **45 Birchgrove Avenue**

State: **Wallsend NSW**

Post code: **2287**

ABN: **38 094 125 176**

ACN: **094 125 176**

Phone: **02 4951 8938**

Fax: **02 4955 7853**

Email: **sales@communis.com.au**

Postal address (if not as above): **P.O Box 1081 Newcastle**

Post code: **2300**

Type of business: **Pty Ltd Co.**

Date of incorporation: **14/08/2000**

State: **NSW**

Bank: **Commonwealth Bank of Australia** Branch: **Newcastle**

Phone: **132221**

Names, date of birth and residential address of directors/partners:

Name: **Andrew Whalan**

Dob: **22/04/1980**

Address: **45 Birchgrove Avenue, Wallsend NSW 2287**

Name:

Dob:

Address:

Name:

Dob:

Address:

Trade references:

Contact name: **Benjamin Nurmi** Phone: **0424 269 265** Fax:

Contact name: Phone: Fax:

Contact name: Phone: Fax:

Anticipated possible monthly purchases \$: **1-5000**

I/We the undersigned declare that the above application is true and correct and agree to the Terms and Conditions as outlined in the current dealer price list. I/We accept the Trading Terms as being STRICTLY COD unless otherwise agreed with an Authorized Officer of Altech Computers. I/We are personally guarantee to pay in full for any goods which have been received by the above mentioned and are held personally liable for any outstanding debts at any stage.

Please check this box if you DO NOT wish to receive our exclusive email specials and newsletters.
 Name Position

Signature

Date

Witnessed

On this date

Name

Position

PLEASE NOTE this application must be signed personally by the Proprietor, by at least two partners or by the Director and the Secretary of the Company.