HYCHEM

"Planned approach to hygiene"

Customer Account Information Form

Please attached copies of the Owner/Directors Identity documents to the completed form. Please note that no account will be processed if the required completed documents including identity documents are not provided

COD		7-Days	
EFT		14-Days	

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Business Name	
Trading Name	
Franchise/ Franchise Group	
Postal Address	
Delivery Address	
Contact Person	
Telephone Number	
Email Address	
Cellular Number	
Company Registration	
VAT Number	
Owner/Director/ CEO/FD	
ID Number (As per ID copy)	
Owner/Director Name	
ID Number (As per ID copy)	

Terms and Conditions:

1. All Payments are strictly to be made based on the payment terms approved by the Supplier.
2. Should any amount not be paid by the Customer on the due date, the whole amount in respect of all purchases by the customer shall immediately become due, owing, and payable. The Supplier will immediately hand the account over to a 3rd party for collections and the customer will be liable for all costs incurred.
3. The Customer shall not be entitled to set off or deduct any payment due to the Supplier for goods or services supplied. Furthermore, the Customer shall not be entitled to withhold payment due on account of the customer having requested a credit or credit note.
4. Cancelations will become effective upon written acknowledgement by Hychem (PTY) Ltd on receipt of a cancelation notice.

Authorized Signature:	
Title:	
Printed Name:	
Date:	