

## NMF Supplier Accreditation Request

<b>Company Information</b>		
Entity Type:    Company <input type="checkbox"/> Business <input type="checkbox"/> Trust <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Trader <input type="checkbox"/>		
ABN:		ACN:
How long have you been operating this business?		Years:                      Months:
<u>Company Name:</u>		
<u>Trading Name:</u>		
<u>Main Contact Person:</u>		<u>Mobile #:</u>
<u>Trading Address:</u>		
<u>Suburb:</u>	<u>State:</u>	<u>Postcode:</u>
<u>Phone:</u>		<u>Fax:</u>
<u>Banking details: Bank:</u>		<u>BSB:</u> <u>A/C:</u>
<u>Industry Type:</u>		<u>Main email address:</u>
<u>History of business:</u>		

<b>Additional Company information</b>	
Do you currently offer leasing?	
Finance volume per month?	
Type of equipment financed?	
Amount of offices?	
Amount of total staff?	
Type of clients financed?	
Number of transactions financed in the past 12 months?	

Director / Authorised signatory:

Print Name: \_\_\_\_\_

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