

Application for Accreditation

Name of Agency _____

Address _____

Telephone _____ Fax _____

Registered Name _____

Date of Registration _____ ACN _____

ABN _____

Holding Company (If Applicable) _____

Director's Name & Address _____

Do you have a Trust Account? _____

Travel Agent Licence No _____ Period of Operation _____

Other Accreditation (List IATA / Domestic Airlines / Coach Operators)

1. _____

2. _____

Please estimate your fortnightly sales for Murrays _____

Two Credit References

1. Name _____ Phone number _____

Address _____

Email _____

2. Name _____ Phone number _____

Address _____

Email _____

Do you agree to allow Murrays to actively display their advertising / promotional material in your agency?

Yes No

In the event of an agency changing hands, do you agree to advise Murrays and instruct the new Proprietors to reapply for accreditation?

Yes No

I/we agree that upon becoming a Murrays accredited agent, I/we will furnish Agency Sales Returns on the 15th and the end of each month, less agents commission of 10%.

In consideration of Murrays Australia Pty Ltd agreeing to supply credit to the above named Business or Company, I/ we personally guarantee payment by the above named Business or Company.

Credit Terms

1. Payment of the account is to be made on the 15th and end of each month.
2. Credit facilities may be withdrawn on overdue accounts.
3. Murrays Australia Pty Ltd reserves the right to use the services of a credit reporting service and a mercantile agent.

Privacy

By signing this Credit Application, the Customer consents to and authorises the Company to obtain any information about any of the Customer's consumer or commercial credit or business history or the Customer's commercial activities or commercial credit worthiness from the Customer's bank or any trade referee disclosed in this Credit Application and any other credit provider or credit reporting agency for the purpose of assessing the application for credit, or in connection with any guarantee and to disclose such information to a credit reporting agency.

Director's Guarantee

I/we the undersigned directors of the Company apply for credit on the above terms and in consideration of an account being granted personally guarantee the Company's obligation with respect to payment of any money owing on such account.

Signature	Name	Date
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Signature	Name	Date
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