



Fit Ltd  
 PO Box 15 Wellsford 0900  
 22 Hood Street Wellsford  
 Free Phone: 0800 852 258  
 Email: info@fit-nz.co.nz

## Cash Account Application Form

### Business Details

|  |                  |
|--|------------------|
| Trading Name: _____  |                  |
| Legal Name : _____   |                  |
| Postal Address: _____  | Post Code: _____ |
| Delivery Address: _____                                      |                  |
| Suburb: _____  |                  |
| Town/City: _____   |                  |
| Phone: ( ) _____   | Fax: ( ) _____   |
| Email: _____   |                  |
| Accounts Contact Person: _____                               | Email: _____     |
| Purchasing Contact Person: _____                             | Email: _____     |
| Please Email Invoice / Statements: Y / N                     | Email: _____     |
| Email to be used for tracking & delivery notification: _____ | Email: _____     |

|  |  |
|--|--|
| <p>Would your team like to hear from us about promotions, special offers and new products once a month via email? (You can opt out at any time):<br/> <b>Y / N</b> (If <b>Y</b>, please complete recipient details overleaf)</p> | <p>A trade login for our website gives you access to your specific pricing information, online ordering, project lists etc. Would you like a trade login set up for our website?<br/> <b>Y / N</b> (If <b>Y</b>, please complete recipient details overleaf)</p> |
|--|--|

**Payment Terms**

I/we agree to pay our account by the 20th of the month following the date of invoice. An account is not deemed to have been paid until funds are cleared. I/we also understand and agree to pay any interest costs at the current bank business overdraft rate calculated daily from the date when payment was due, until made in full as well as any collection charges, legal fees, salvage charges, storage costs and any other costs incurred in the event of late payment.

**Reservation of Title**

I/we agree that Title in any goods supplies is reserved by you until receipt of full payment. I/we understand and accept that you have the right under the Wages Protection and Contractors' Leins Repeal Act 1987 to retail possession of goods until charges are paid. You are entitled (for yourselves or through any agent or employee) to come on to our land to uplift and remove any goods supplied, and to sell those goods if necessary to recover unpaid monies. No responsibility for any loss is accepted by you in the eventuality. You may also register title to any goods and/or services supplied by you to us against my/our name on the Personal Property Security Register. And we waive our right to receive a copy of the verification statement. The parties agree to contract out of sections 114(1)(a), 117(1)(c), 116, 119, 120(2), 121, 125, 129, 131, 132, 133 and 134 of the PPSA.

**Our Liability To You**

If I/we are not satisfied with any aspect of the goods and/or services when installed or completed, I/we must advise you within 7 days of installation/completion. If I/we do not do so, then you will not have any further liability in respect of alleged defects. Further, you are not liable for any alleged consequential damages or loss occasioned by any claim in respect of the goods supplied or their installation nor in respect of any services rendered. Your total liability for any loss respect of the goods supplied or their installation nor in respect of any services rendered. Your total liability for any loss or damage in such circumstances is in any case the price agreed between us for supply of goods or services.

**Privacy Act**

I/we give authority to any person or company to provide you with any information you require to process this application and I/we agree to you furnishing any third party, details of this application and any future dealing I/we may have as a result of this application.

Signed: \_\_\_\_\_ Full Name: \_\_\_\_\_

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

Please help us to understand your business and deliver an exceptional service to you, by completing the information overleaf.

**Please complete all of the above and overleaf and email to info@fit-nz.co.nz**



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### Further Information To Help Us Deliver Exceptional Service To You

|   |   |   |
|---|---|---|
| <p><b>No. Employees -</b><br/> <b>Please Tick One Box:</b><br/> <input type="radio"/> Under 3<br/> <input type="radio"/> 4-9<br/> <input type="radio"/> 10-14<br/> <input type="radio"/> 15-19<br/> <input type="radio"/> 20+</p> <p><b>No. of Years in Business:</b></p> | <p><b>Business Type - Please Tick One Box:</b></p> <input type="checkbox"/> Architect<br><input type="checkbox"/> Bathroom & Vanity Manufacturer<br><input type="checkbox"/> Benchtop Manufacturer<br><input type="checkbox"/> Boat Builder<br><input type="checkbox"/> Cabinet Maker<br><input type="checkbox"/> Furniture Manufacturer<br><input type="checkbox"/> Hardware/DIY Retail<br><input type="checkbox"/> Independent Kitchen Designer | <input type="checkbox"/> Kitchen Manufacturer<br><input type="checkbox"/> Kitchen Retailer<br><input type="checkbox"/> Office Furniture Manufacturer<br><input type="checkbox"/> Recreational Vehicle Manufacturer<br><input type="checkbox"/> School<br><input type="checkbox"/> Trade Reseller<br><input type="checkbox"/> Wardrobe Manufacturer<br><input type="checkbox"/> Export<br><input type="checkbox"/> Other |
|---|---|---|

**Website Login:**  
 Your main login username **must** be the primary invoice/statement email address you provided on page 1  
 If you would like any additional email addresses set up as user names, please list them below:

| Name    | Email Address |
|---------|---------------|
| 1 ..... | .....         |
| 2 ..... | .....         |
| 3 ..... | .....         |
| 4 ..... | .....         |
| 5 ..... | .....         |

We will contact you at these email addresses as soon as your login is established, advising you of your password

**Communications:**  
 Fit send two types of product-focussed email newsletters each month.\*  
**TRADE EMAIL** - covers new products, product improvements, promotions and special deals of interest to trade accounts.  
**DESIGN EMAIL** - covers product information of interest to kitchen/interior designers and to architects.

Please list below the details for each person within your business who wish to receive these communications, and tick which newsletter(s) they should receive.

\*Note that recipients of Fit newsletters may unsubscribe at any time. Information is held safely and is not shared with third parties. Business-critical changes such as changes to terms, price changes or Fit contact information are emailed to ALL contacts.

| First Name | Last Name | Position/Role | Email Address | Phone | TRADE                    | DESIGN                   |
|------------|-----------|---------------|---------------|-------|--------------------------|--------------------------|
| 1 .....    | .....     | .....         | .....         | ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 .....    | .....     | .....         | .....         | ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 .....    | .....     | .....         | .....         | ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 .....    | .....     | .....         | .....         | ..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 .....    | .....     | .....         | .....         | ..... | <input type="checkbox"/> | <input type="checkbox"/> |

**Please complete all of the above and overleaf and email to info@fit-nz.co.nz**