

**CREDITOR / SUPPLIER SET-UP FORM**

Please fill in all fields except for 'Accounts use only' &amp; use 'N/A' if not applicable

Date		Branch	Truckstops Albany
<b>COMPANY DETAILS</b>			
Company Name			
Company GST Number			
<b>CONTACT DETAILS (please fill out all check and correct any errors)</b>			
Postal Address			
Suburb			
City		Post Code	
Physical Address			
Suburb			
City		Post Code	
Phone		Fax	
Website			
<b>KEY CONTACT</b>			
Contact Name		Title	
Mobile		DDI	
Email (Remittances)			
Notes			
<b>PAYMENT DETAILS</b>			
Bank Account Name			
Bank Account Number			
Please supply a deposit slip or an email stating your account details			
Account # / Reference			
Please indicate Truckstops account number and any required details for payment references			
Payment Terms		(20th Month or Prompt)	
<b>TRUCKSTOPS ACCOUNTS USE ONLY</b>			
Account Number			