



Fresh State LPG Gas Station Card

APPLICATION FORM

Customer's Name:

ABN/ACN:

Address:.....

Address for Tax Invoices:.....

Phone Number:..... Fax:

Email:.....

Name of Customer Representative:

Vehicles using the LPG Gas Station:

Table with 5 rows and 2 columns for Forklift Registration Numbers.

If you required more LPG Gas Station Cards, please complete on a separate sheet.

AGREEMENT AND AUTHORISATION

We ('Customer') have read and agree to comply with the Terms and Conditions of the use of the Fresh State LPG Gas Station attached.

All Fresh State Gas Station Card Holders must be registered users of the Melbourne Market Credit Service.

[] We authorise Fresh State Ltd to charge our LPG and related purchases to our Melbourne Market Credit Service Registered Account Number:.....

[] I/We would like to become a registered user of the Melbourne Markets Credit Service (please note the MMCS will contact you directly regarding registration)

Signature of Principal or Director: Date:.....

Name of Principal or Director (Please Print)

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