

WHOLESALE APPLICATION

YOUR COMPANY INFORMATION

Name: ABN No: Address: Phone No: Email Address:
YOUR COMPANY TRADE REFERENCES
Name: Phone: Name: Phone: Name: Phone: Initial Estimated Monthly Purchase\$:
I/We hereby state that the above information is true and correct, and I/we agree to be bound by the Terms and Conditions of The RodWorks. Signed:
<u>Date</u> / /

36 Barmera Avenue; Hope Valley. S.A 5090

Ph:- 08-83950755, 08-872212391 M:-0418104265

Email:- admin@therodworks.com.au