



Number 1 (Australia) Pty Ltd
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Trade / Professional Registration Form

Date: _____

Customer Details					
Customer Name					
Trading Name					
Proprietor		ACN			
Date Established		ABN			
Postal Address		State		Post Code	
Delivery Address (attach separate sheet if more than 1 delivery address)		State		Post Code	
	Contact phone		E-mail		
Main Business Number			Mobile number		
Buyer's Name			Buyer's Phone		
Buyer's Email			Buyer's Fax		
Accounts Name			Accounts Phone		
Accounts Email			Accounts Fax		
Invoice/Statement Address, if different from Delivery Address		State		Post Code	
Payment Details. If you'd like us to hold your credit card details on file, please complete section below.					
Card-holder name		Type (Visa/Mastercard/AmEx):			
Card number		Expiry:		CVN:	
If you prefer to pay by EFT or cheque, please complete the section below					
Bank Name & Branch					
Bank Account-holder Name					
Type of Business					
Retailer - Pet Supplies	<input type="checkbox"/>	Boarding/Day-care	<input type="checkbox"/>	Dog Trainer	<input type="checkbox"/>
Online Store	<input type="checkbox"/>	Health food retailer	<input type="checkbox"/>	Supermarket/Convenience Store	<input type="checkbox"/>
Vet	<input type="checkbox"/>	Nutritionist	<input type="checkbox"/>	Naturopath	<input type="checkbox"/>
Pet rescue	<input type="checkbox"/>	Breeder	<input type="checkbox"/>	of	
Other (please specify details)					
Pets of Interest to your business		Brands of Interest to your business		Please indicate below if you would like	
Dog	<input type="checkbox"/>	ZIWI Peak	<input type="checkbox"/>	A visit from a rep	<input type="checkbox"/>
Cat	<input type="checkbox"/>	DGS (Dog Gone Smart)	<input type="checkbox"/>	Sample ZIWI products	<input type="checkbox"/>
Internet Requirements					
Website					
FaceBook Page					
Would you like listing as a Stockist on www.ziwipets.com?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Would you like to receive a link to Zivi images and documents?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Normal trading days/hours. Please indicate any delivery instructions.					
Other Details or Special Instructions					
Office Use Only					
Phone Discussion	<input type="checkbox"/>	Entered NS	<input type="checkbox"/>	Price List Sent	<input type="checkbox"/>
Scanned	<input type="checkbox"/>	Added to Website	<input type="checkbox"/>	Filed	<input type="checkbox"/>

Please note: This is not an application for Credit terms. We normally require three full months trading history with us before we consider credit terms. Contact us if/when you want to apply for a credit account or set up automatic credit card payments..