

Ulendo Safaris (Malawi) Limited
CREDIT APPLICATION FORM

Name of Applicant:

Physical Address:

Postal Address:

e-Mail:

Business Registration No:

Telephone Number:

Fax Number:

Type of Organization:

Public Company

Partnership

Private Company

Government

NGO

Parastatal

Diplomatic Mission

Private Individual

Contact Persons

PERSON RESPONSIBLE FOR RESERVATIONS

Name:

Direct Tel:

e-Mail:

PERSON RESPONSIBLE FOR ACCOUNTS

Name:

Direct Tel:

e-Mail:

Credit Limit Required:

Monthly Travel Expenditure:

Preferred Credit Plan

7 Days from Invoice

14 Days from Invoice

Please indicate how your organization wish to authorize travel services charged to your account

Local Payment Order (LPO) or Internal Travel Authority

Fax or e-Mail instruction

Verbal instruction or other (please specify)

TERMS AND CONDITIONS OF CREDIT

1. The successful applicant (hereinafter called "the Credit Customer") must settle all invoiced amounts within the stipulated days from date of invoice, or date of statement, in accordance with the credit plan indicated in this application.

2. ULEND0 SAFARIS LIMITED, and our associated operations, reserve the right not to grant further service under credit to the Credit Customer in the event that:

(a) The approved credit limit is exceeded; or

(b) The Credit Customer has not settled any invoices due under the agreed credit terms even when there is sufficient credit remaining in the facility.

3. ULEND0 SAFARIS LIMITED reserve the right to;

(a) Charge interest at 5% per month on amounts exceeding the credit term of thirty (30) days;

(b) To increase or decrease the credit limit as our Company deems fit;

(c) To terminate the credit facility at any time without prior notice and all outstanding amounts shall be payable on demand; or

(d) To withdraw the credit facility without prior notice if the credit facility has not been utilized for more than 6 months.

4. Any objection to the validity of charges invoiced must be made within seven (7) days from the invoice date otherwise our Company will assume invoice details are correct and payment will be effected under the terms of this facility.

5. The Credit Customer must advise ULEND0 SAFARIS of any changes to contact details or authorized persons indicated on this application to transact on their behalf and agrees to settle all invoices charged to their account by their authorized representatives.

6. Full payment for unused travel services invoiced by ULEND0 SAFARIS is still required under the terms of this facility and may not be deducted from balance reflected on your statement. Refund requests will be processed and any credit notes will only be reflected on statements once they have been approved by the principle service provider.

I/We agree to the above mentioned terms and conditions of application and confirm that we have read and accept ULEND0 SAFARIS full Terms and Conditions of Business which are available on the Companies website www.ulendo.net. I/We confirm that the information furnished in this credit Application Form is correct and that I am/we are authorized to sign on behalf of the organization named in this

application.

Dated this _____ day of _____, 20_____

Signature: _____

** Please affix organizations rubber stamp*

Designation: _____

Approved / Declined Credit Limit Date Authorizing Manager