



Seaco Container Sales Customer Form

Section 1: Details of the Legal Entity

Company's Full Legal Name			
Trading Name/Doing Business as (if different from above)			
a. Registered Address			
City	State (Province)		
Post Code	Country		
b. Business/Office Address (If different from above)			
City	State (Province)		
Post Code	Country		
Company's registration #			
VAT # (if applicable)			
Contact Name			
Phone	Fax		
Website			

Note: Payments made to Seaco must originate from the company name listed above.

Legal Status:	Corp. <input type="checkbox"/>	Partnership <input type="checkbox"/>	Ltd Liab Co <input type="checkbox"/>	Sole Prop <input type="checkbox"/>	Individual <input type="checkbox"/>
<p>Please provide documentation to support the legal status e.g. Certificate of Incorporation; Business Registration Certificate; Passport/Government ID (for individuals)</p> <p><i>Please ensure that the registered address is identical to the address listed on the certificate of incorporation or equivalent document.</i></p> <p><i>If the address is different from official document or there has been a change, please indicate so.</i></p>					

Section 2: Billing Details

Billing Contact Details:	Note: Invoices and Releases will be sent to this email address
Name	
Phone	
Email	



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Section 3: Shareholder Details

Shareholder Details:		Percent
Shareholder's name		% of shares
Shareholder's name		% of shares
Shareholder's name		% of shares
Shareholder's name		% of shares
Shareholder's name		% of shares
	Total	100%

IF any corporate shareholder owns 10% or more, please provide shareholder details of the corporate shareholder(s). Same information is required if the ultimate shareholder(s) hold 25% or more of the equity.

Section 4: Management Details

Management Details:	
Chairman of the Board	
Chief Executive Officer	
Chief Financial Officer	
Operations Manager	
Finance Accounts Manager	

****FOR CREDIT APPLICATION ONLY**

Section 5: Financial Documents (Applications submitted without these documents will not be considered for credit terms)

Financials (2 years)	Please indicate which financial documents are attached
Balance Sheet	<input type="checkbox"/>
Income Statement	<input type="checkbox"/>
Tax Return	<input type="checkbox"/>
Other	

I undertake that the company and account details above are correct and proper details	
Signature:	
Printed Name:	
Position:	
Date:	

----- **END** -----