

Ingram Micro NZ Ltd

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MKDenial.com checked []

APPLICATION FOR CASH ACCOUNT

COMPANY NAME (in full) _____

DATE OF COMPANY REGISTRATION _____ COMPANY NO: _____

ADDRESS OF REGISTERED OFFICE _____

PHONE NO: _____ FACSIMILE : _____

POSTAL ADDRESS: _____

DELIVERY ADDRESS: _____

EMAIL ADDRESS _____

PRINCIPAL DIRECTORS:

NAME IN FULL	ADDRESS	PHONE
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Dated this _____ day of _____ 2002.

Name:

Signature:

