



# Dove Electronics Limited

Head Office  
10 Print Place, Middleton, Christchurch  
PO Box 33-166, Barrington  
Telephone: (03) 338-4722  
Fax: (03) 338-5564  
Internet: [www.dove.co.nz](http://www.dove.co.nz)

Branch  
145 Taranaki Street, Wellington  
PO Box 6105, Te Aro  
Telephone: (04) 384-3336  
Fax: (04) 384-4335

Branch  
71 Hugo Johnston Drive, Penrose,  
Auckland  
PO Box 13-103, Onehunga  
Telephone: (09) 525-3102  
Fax: (09) 525-3104

Thankyou for requesting an account application form.

Dove is a wholesale distributor and as such we do not sell to end users. Therefore only bona fide resellers and integrators will be given an account. We generally require some or all of the following to indicate reseller status:

Industry trade references  
GST registration  
Visible market presence

If these are not available or applicable in your case, but you feel a reseller account is warranted please attach a note of explanation to the form. If you are a new business, include some brief details of your business plan, target customers, channel methodology, and background.

It is also helpful if you indicate the payment terms and credit limit you would prefer.

A personal guarantee is requested for applicants wanting credit terms. If this is unsuitable in your case please attach a brief note.

Please print and return (or scan to [accounts@dove.co.nz](mailto:accounts@dove.co.nz)) to us, once completed, signed and the terms and conditions initialled on page 4. We request that you return the forms directly to our Christchurch office.

Please allow up to 7 days from receipt of your application for processing, you will be emailed with details of the account and your website login when the account is opened. If you require the account urgently please let us know.

We look forward to receiving your application in due course.

Yours Sincerely

Dove Electronics Limited



# Dove Electronics Ltd

10 Print Place, Middleton  
 P O Box 33 166, Christchurch  
 Ph: (03) 338 4722 Fax: (03) 338 5564  
 E: ch\_sales@dove.co.nz

145 Taranaki St, Te Aro  
 P O Box 6105, wellington  
 Ph: (04) 384 3336 Fax: (04) 385 4335  
 E: wn\_sales@dove.co.nz

71 Hugo Johnston Dr, Penrose  
 P O Box 13-103, Auckland  
 Ph: (09) 525 3102 Fax: (09) 525 3104  
 E: ak\_sales@dove.co.nz

Date Rec'd	/	/	/
Terms:		Limit: \$	

## Account application

Terms requested: Cash  7 Day  20th Month  Credit Limit \$ \_\_\_\_\_

Legal name:

Trading Name (if Different):

Limited Liability <input type="checkbox"/>	Company No:	Registered	
Please complete the Personal Guarantee.	Paid Up Capital:	office	

Postal Address:	Delivery Address:

Phone No:	Fax No:	Website:
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Date Business Commenced:	GST Registration No.:
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Directors / Proprietors Full name	Address	Date of Birth	Phone

Name of person completing this form:	Phone #
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Position:	Mobile #
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**Trade References** - Please provide details of three suppliers where you hold monthly accounts

Company	Contact	Phone No.	Email

**Personal Information:** Dove Electronics Ltd will use any personal information on this form for credit, administration, service and marketing purposes. If full information is not provided your application for credit may be declined. You have the right of access to, and to ask for correction of personal information. You further authorise Dove Electronics Ltd to furnish to any third party details of this application and any subsequent dealings that you may have with it as a result of this application being actioned by you and in relation to any account you may have with it. You understand that Dove Electronics Ltd may register a security interest over any goods it supplies to you.

**Customer Declaration:** I/We declare that the above is true and correct. I warrant that I am solvent and able to pay my debts as they fall due. I/We have read Dove Electronics Ltd Terms of Trade (on page 3) and agree to be bound by them. Under the terms of the Privacy Act 1993 I/We authorise any person or company to provide Dove Electronics Ltd with such information as it may require in response to credit and/or other enquiries.

name	Signature	Position	Date

If a company, must be signed by Secretary/Director or duly authorised person and if a partnership, all partners must sign.

<b>Contacts</b>	<b>Name</b>	<b>Email Address</b>	<b>Phone</b>	<b>Mobile</b>
Purchasing				
Sales				
Accounts				
Admin				

**Sales & Purchasing contacts will be automatically set up to receive product & pricing email updates - place X next to email address to not receive these.**

**Please indicate with a tick alongside the name, one person who will be the administrator of your access to the Dove Dealer Website.**

**Brief business description:**

**Customers:** Corporate  SME  Education  Government  Retail  Internet   
**Revenue from:** PC/Notebooks  Printers/Peripherals  Service/Repairs  SI  Networking   
 Internet  Software Dev / sales  Web dev/sales  Security  industrial Automation

**Any other information or request ?**

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**CONTINUING PERSONAL GUARANTEE**

**To: Dove Electronics Ltd.**  
**A duly incorporated company having its registered office at Christchurch.**

I, ..... **Date of Birth** .....

I ..... **Date of Birth** .....

**(PRINT FULL NAME OF GUARANTOR/S)**

In consideration of Dove Electronics Ltd supplying and at my/our request agreeing to continue to supply products to:

.....(Registered Name of Company) hereinafter referred to as 'the principal debtor' (which you have done), **HEREBY GUARANTEE(S)** the due and punctual payment of all monies and obligations now due or to become due by the principal debtor and agree to be jointly and severally answerable and liable to you and the following provisions shall be applicable to this guarantee:

This guarantee is a continuing guarantee. No granting of credit extension of former credit or granting of time to the principal debtor and any waiver indulgence or neglect to sue on its part nor the release of any securities held by it nor the winding up or bankruptcy of the principal debtor shall affect my/our liability to you hereunder and as between Dove and me/us I/we shall be deemed to be a principal debtor and shall be liable to Dove accordingly.  
 This guarantee shall continue in force notwithstanding that the principal debtor's account with Dove may be from time to time in credit.  
 Within seven (7) days from my/our receipt of notice in writing of any default on the part of the principal debtor I/we shall make payment to Dove of all sums in respect of which such default has been made.  
 This guarantee shall bind my/our personal representatives

**Dated** this ..... day of .....

Signed by the said: } .....

} .....

Guarantor/s) } .....

in the presence of:

**Witness:**

(Sign Here)

**Name:** ..... **Address:** .....

**Occupation:** .....

