

## CREDIT FACILITY APPLICATION

WE WISH TO APPLY FOR CREDIT FACILITY FROM YOU FOR SERVICES UNDER A CREDIT ACCOUNT. TO SUPPORT OUR APPLICATION, WE FURNISH BELOW DETAILS WHICH WE WARRANT AND GUARANTEE TO BE CORRECT.

Name Of Company:		Nature Of Business:	
Registered Address:		Mailing Address (if different from registered address)	
Registration No.:	Telephone No.:	Fax No. / Telex No.:	
Authorised Capital:	Paid Up Capital:	Email Add:	
Date/Place of Incorporation:		Name of Financial Controller / Accountant	
Name of Managing Director / GM		Name of Banker(s)	
Account No(s)		Name of Bank(s)	
Branch		Account No(s)	
1)			
2)			
3)			
Credit Limit Required:			
List of Other Trade Reference Where Credit Facilities Have Been Extended To You.			
1)			
2)			
3)			
<p><b>NB: TTM Travel Agency Pte Ltd reserves the right to revise from time to time the above terms and credit limit without prior notice. A 1.5% interest per month will be levied on overdue invoices. We further reserve the right at any time to withdraw the facilities and such withdrawal shall be effective upon issue of a notice (regardless of whether the notice has been received by you). Upon the issue of the notice all outstandings and liabilities, whether actual or contingent, shall be repaid to us immediately.</b></p>			
Signed on Behalf of Company By		<b>For Office Use</b>	
_____ Name Designation: Company Stamp:		Credit Limit:	
		Approved By:	
		Date:	

Please return this application from to the accounts department of TTM TRAVEL AGENCY PTE LTD.  
 20 Cecil Street #12-08 Equity Plaza Singapore 049705  
 or fax it to (65) 6535 4369