

Application for Funding

Company / Business Details		Date:
Name: (Company Name/Partnership/Sole Trader)	ACN:	
Trust Name: (if a Trust)		
Trading Name: (Registered Business Name)	ABN:	
<input type="checkbox"/> Company	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Partnership
<input type="checkbox"/> Trustee		
Nature of Business:		
Street Address: (not a PO box)		
	State:	Postcode:
Postal Address: (if different)		
	State:	Postcode:
Telephone:	Fax:	
Mobile:	Email:	
Partner, Sole Proprietor, Director or Trustee Details		
Full Name: (Person 1)		Telephone:
Residential Address:		
	State:	Postcode:
Full Name: (Person 2)		Telephone:
Residential Address:		
	State:	Postcode:
Full Name: (Person 3)		Telephone:
Residential Address:		
	State:	Postcode:
Bank Details (for us to deposit funding)		
Bank:	BSB:	
Name of Account:	Account No.:	

*Please also provide a scanned copy of the Drivers Licences of all Directors or Proprietors

PLEASE COMPLETE THE ABOVE AND EMAIL TO [INFO@WOODSMAN.COM.AU](mailto:info@woodsman.com.au) OR FAX TO THIS OFFICE ON 1300 975 291
WE WILL THEN PREPARE AND SEND A FUNDING AGREEMENT FOR YOUR CONSIDERATION