



CASH ACCOUNT APPLICATION

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Trading Name _____

Contact Name _____

Physical Address _____

Postal Address _____

Telephone _____

Mobile _____

Email address _____

Signed _____

Dated _____

Red fields are required

Please send completed form to accounts@regal.co.nz

Regal use Only

Account Code Assigned _____

Entered By _____

Date Entered _____

____ / ____ / ____