



Accounts Receivable Account Application Form (Individual)

Initiating Department Contact Details

Staff Name	
Position	
Phone Number	
Email Address	
Name of Department	
Contract Work (Will there be ongoing/regular invoicing, if so do we have a supporting signed contract.)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Credit Check required	Yes <input type="checkbox"/> No <input type="checkbox"/> - if Yes please contact Accounts Receivable, FSD at: receivables@otago.ac.nz

Once departmental details are completed email form to Applicant using this button:

Customer/Debtor Details

Applicant to complete:		
Family Name:		
First Names:		
Date of Birth:		
Street Address 1:		
Street Address 2:		
Suburb:		
City:		Post Code:
Country:		
Postal Address: (if different from above)		
Street Address 1:		
Street Address 2:		
Suburb:		
City:		Post Code:
Phone Numbers:	Mobile:	Work:
	Home:	Fax:
Email Contact:		
<p>Please email your Payment Remittances to: receivables@otago.ac.nz Advising account number and invoice numbers</p>		

Terms and Conditions	<p>The Revenue Management Office in the Financial Services Division manages the collection of debt for the University of Otago.</p> <p>A Statement of all invoices issued in the current month is sent to the debtor at the end of the month. It is University practice that all invoices on these Statements are to be paid by the 20th of the month following (normal commercial practice).</p> <p>If the debt remains unpaid after 90 days, the debt will be referred to a collection agency, collection costs will be incurred by the debtor.</p>
Applicants Acceptance	Check this box to confirm acceptance of Terms and Conditions

Upon completion the signed form needs to be returned to:

Press this button to email completed form

Or send to:

University of Otago
Financial Services Division
Revenue Management Office
PO Box 56
Dunedin 9054
NEW ZEALAND

Or Fax to: 03 479 9035