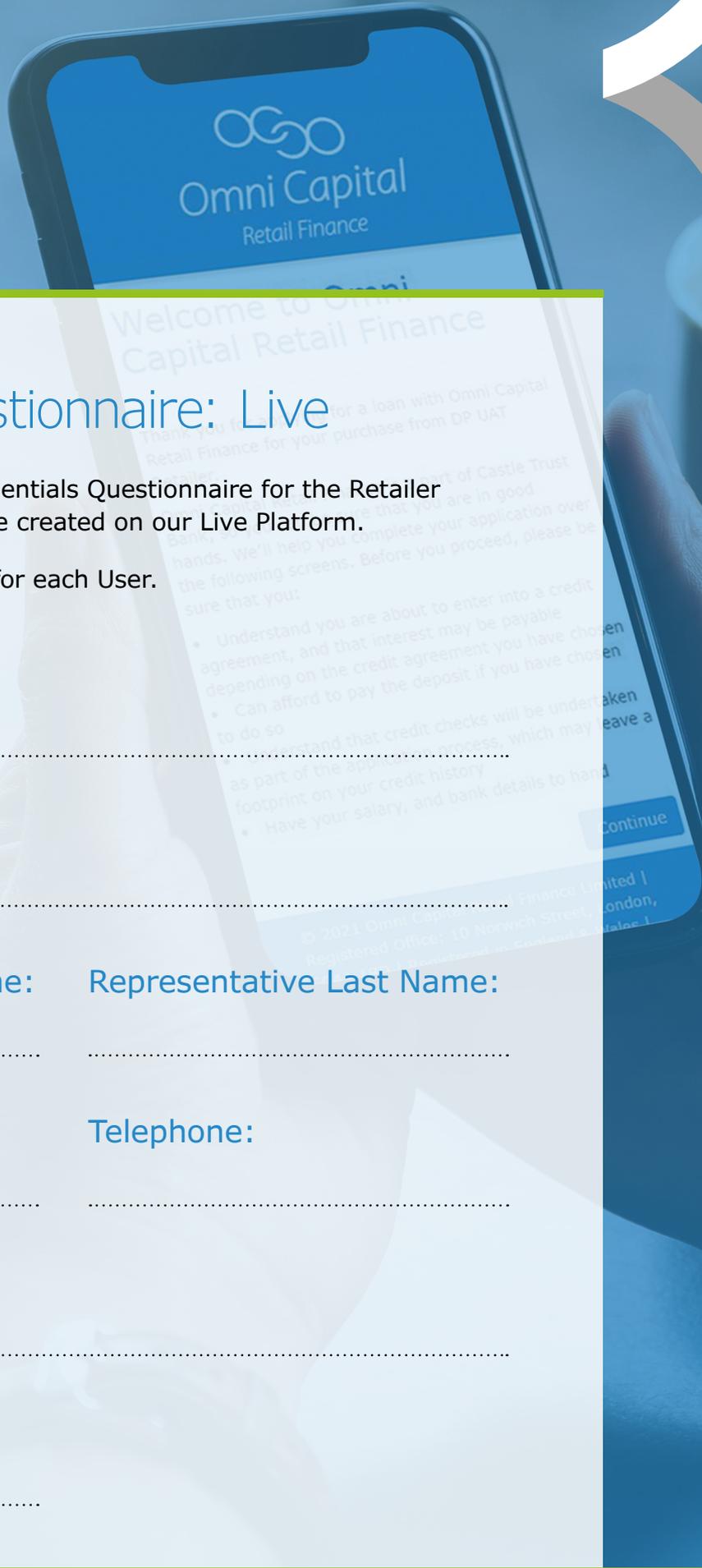




Omni Capital

Retail Finance

Powering purchases.
Improving lives.



Credentials Questionnaire: Live

Please complete the below Credentials Questionnaire for the Retailer Account and User you would like created on our Live Platform.

Please submit a separate form for each User.

Retailer Name:

.....

Branch Name:

.....

Representative First Name:

Representative Last Name:

.....

.....

Email:

Telephone:

.....

.....

Branch Address:

.....

Branch Postcode:

.....