

Application for Credit

Please fill in ALL the information and return it to us by freepost.

(No stamp required)

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Company Name	
Trading Name	
Address	
Postcode	
Contact Name	
Tel No	
Fax No	
Email	

Name(s) & Home	Address(es) of	f Directors, Partners	or Proprietor:
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Name	
Address	
Postcode	

Name	
Address	
Postcode	

Bank Details:

Name	
Address	
Postcode	
Tel No	
Account Name	
Sort Code	
Account No.	

Company Information:

VAT No.	
Company Registration No.	
Date of Incorporation	

Company Details:

Premises (please delete)	Freehold / Leasehold / Rented
Aproximate Annual Turnover	
Total Number of Staff	

Type of Company: (Please tick)

Limited Company	Partnership	
Public Limited Company	Sole Trader	

Trade Refernces:

Name	
Address	
Postcode	

Name	
Address	
Postcode	

A copy of our Terms & Conditions of sale are overleaf. Please confirm the above details are correct and that you agree to abide by our terms and conditions of trade by signing below. (This MUST be a director's, partner's or proprietors signature who signs on behalf of the whole company.)

Signed	
Print	Date
Signed	
Print	Date

