

Application for commercial credit



Company details

Full Legal Title

Trading as (if applicable)

Trading address

..... Postcode Tel.

Fax E-Mail VAT Number

Contact name for payments **Tel. Ext'n:**.....

If a Limited Company or Public Limited Company:

Registered office address

.....

Date of Incorporation Company Registration No.

If a Partnership or Sole Trader give full names (not initials) and private addresses of all Partners/ Directors/ Proprietors. (Continue on reverse if required).

a)

.....

b)

.....

Year of Commencement? Years at above address

Bankers Details

Bankers name

Address

..... Postcode

Account name Account No. Sort Code

Trade References (minimum 2) – must be unconnected with the applicant company.

1) Name and address.....

..... Contact Name

Telephone Fax

2) Name and address

..... Contact Name

Telephone Fax

Maximum credit required

Name of Managing Director/Senior Partner.....

Declaration by Applicant

Directors/Partners Declaration.

I, being a Director /Authorised Officer of this business, do agree that payment of all accounts will be received by you (our supplier) within your stated credit terms of 30 days from date of invoice (or other prearranged terms). I/We appreciate that adherence to this obligation is the essence of the contract between us.

We hereby request you open a credit account.

Signed **Print Name**

Date

If your order is urgent, to avoid delay whilst credit references are obtained, you can pay for your order by telephone using a UK bank debit card or any current Visa or Mastercard credit card.