

CREDIT APPLICATION FORM

ACC No.		Sales Rep	
Company Name			
Trading Title			
Address			
Postcode		Tel No.	
Credit Limit		Fax No.	
Date of Formation		LTD Co Reg No.	

*COMPANY INFORMATION SOLE TRADERS/PARTNERSHIPS/DIRECTORS TO COMPLETE

Mr/Mrs	Forenames	Surname
Home Address		
Post Code		
Mr/Mrs	Forenames	Surname
Home Address		
Post Code		

TRADE REFERNCES (x2)

Co Name		Co Name	
Contact		Contact	
Tel:		Tel:	
Fax:		Fax:	

TERMS: 30 DAYS NETT

BANK REFERENCE

* i. Sole traders/partnerships must provide home addresses (if less than 2 years at this address please detail previous addresses on a separate sheet).

ii. Limited companies less than 2 years old – directors must provide home addresses.

iii. If more than 2 partners/directors please continue on a separate sheet.

Bank	
Branch	
Address	
ACC No	
Sort Code	

SIGNED FOR CUSTOMER		DATE	
AUTHORISED BY:		DATE	