



## CUSTOMER CREDIT / ACCOUNT APPLICATION FORM

### Company Details

Name			
Street			
Town			
County		Telephone	
Post Code		Fax	
Company Registration Number		VAT Number	

### Account Invoice & Payment Details

Name			
Street			
Town			
County		Telephone	
Post Code		Fax	
Company Registration Number		Contact Name	

If you are a limited company please state your registered office address if different from the above.  
If you are a private company please state your proprietor name and address if different from above.

### Address Information If Different

Name			
Street			
Town			
County		Telephone	
Post Code		Fax	

### References

Credit / Trade Reference 1	Credit / Trade Reference 2

For Terms & Conditions Please See Separate Sheet

### Acceptance of Terms

Signed		Position	
Name In Capitals		Date	

### Office Use Only

Customer Account Number		Credit Limit	
Credit Facility Authorised By		Value Of Initial Order	
		Special Terms	

