

## Account Application Form

Registered name:	
Registered office:	Registered number:
	Nature of business:
	Date commenced trading:
Sales contact name:	Contact name for payment:
Telephone:	Telephone:
Email:	Email:
Trading address:	Invoice address (if different)
Postcode	Postcode
Telephone:	Telephone:
Fax:	Fax:
Email:	Email:
Organisation type: <input type="checkbox"/> Sole trader <input type="checkbox"/> Limited Co <input type="checkbox"/> Partnership <input type="checkbox"/> Charity <input type="checkbox"/> PLC <input type="checkbox"/> Other	

Please give the name of two directors. For partners and sole traders a home address is required.

Name:	Name:
Address:	Address:
Telephone:	Telephone:
Email:	Email:

**IMPORTANT:** The applicant is responsible for the indebtedness, irrespective of who gives the instructions. It is therefore important that only approved personnel are allowed to place orders, which must be accompanied by a purchase order.

<b>Supplier trade reference 1</b>	<b>Supplier trade reference 2</b>
<b>Name:</b>	<b>Name:</b>
<b>Address:</b>	<b>Address:</b>
<b>Telephone:</b>	<b>Telephone:</b>
<b>Email:</b>	<b>Email:</b>
<b>Bank name:</b>	<b>Branch:</b>
<b>Account name:</b>	<b>Sort code</b>
<b>Account number:</b>	<b>Number of years account held for:</b>
<b>How much do you estimate you will spend with us per month?</b>	<b>£</b>

**Declaration:**

I/We confirm that the above information is correct in all respects.

I/We acknowledge that should the application for credit facilities be accepted, our credit terms are the end of the month following invoice date and if my account is not settled in full within these terms, I/we may incur late settlement surcharges and the account may be placed on stop.

<b>Signed:</b>	<b>Print name:</b>
	<b>Date:</b>
	<b>Position:</b>