



TRADE CUSTOMER APPLICATION

Type of Account

Cash

Credit

Proprietor or partners' names

Company or Business trading name

Type of entity

Address

Postcode:

Business type (eg Vehicle repairs, etc.)

Date trading commenced

Company registration number

VAT number

Telephone number

Fax number

Email address

Estimated monthly spend

Credit limit required

Products of interest

Would you be interested in receiving our newsletter regarding
special offers?

Yes

No

Statement / invoice address
(If different from Page 1)

Postcode:

Time at this address

Previous address
(If less than 3 years at current address)
Postcode:

Accounts contact Buyer Contact

Accounts telephone Buyer telephone

Accounts fax Buyer fax

Accounts email Buyer email

Trade References:

Name of Company

Telephone Number

Years Trading with Credit Limit

Name of Company

Telephone Number

Years Trading with Credit Limit

Partners / directors information:

Name

Date of birth

Address
Postcode:

Home owned? Yes No

Name

Date of birth

Address
Postcode:

Home owned? Yes No

Declaration of Proprietor / Partners / Directors

I / we accept and agree that I / we have read and understood the terms and conditions enclosed, and agree that they govern this contract and that I / we intend to be bound by them.

Signed

Name

Position in company

Date

Office use only

Credit agreed Yes No By whom

Account number TM

Date activated SP-T

Account manager Authorised by

Set task