



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