APPLICATION FOR CREDIT ACCOUNT

- YOUR COMPANY LTD -

CUSTOMER DETAILS			
Company name:			
Address:			
Address:			
Postcode:			
Type of company:	☐ Limited Company	☐ Sole Trader	☐ Partnership
Registration number:			
Registered Office Address (if different from above)			
Telephone:			
Fax:			
Email:			
Purchasing contact:			
Accounts contact:			
TRADE REFERENCES	5		
Company 1:			
Contact name:			
Address:			
Postcode:			
Telephone:			

Email:		
Company 2:		
Contact name:		
Address:		
Postcode:		
Telephone:		
Email:		
BANK DETAILS		
Bank name:		
Branch:		
Account number:		
Sort code:		
I authorise -Your Company Ltd- to obtain references from the above, as and when appropriate. I agree to abide by the Terms and Conditions as set out by -Your Company Ltd- which include that all invoices are due to be paid within 30 days from the date of invoice and that a Purchase Order must be given for services rendered.		
Signed:		
Printed name:		
Position:		
Date:		