



APPLICATION FOR A TRADE ACCOUNT

COMPANY NAME:Date:

INVOICE ADDRESS:

.....POST CODE:TEL:

FAX:E-Mail:

NUMBER OF YEARS TRADING: CONTACT:

Is the Company Limited: YES/NO IF YES PLEASE GIVE REG. No:

Address of Registered Office (if different from above):

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Names & Addresses of Partners/Directors (delete as appropriate)

1. Name & Address:

.....Post Code: Tel:

2. Name & Address:

.....Post Code: Tel:

3. Name & Address:

.....Post Code: Tel:

Total Credit Required: £

TRADE REF 1 Name: TRADE REF 2 Name:

Address: Address:

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Telephone No: Fax No..... Telephone No:Fax No.....

Bank: Account No:

Address: Sorting Code:

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Goods supplied are subject to our "Terms And Conditions of Sale", a copy of which is enclosed.

DECLARATION BY APPLICANT: We acknowledge receipt of your Terms And Conditions of Sale referred to above and agree that all business transacted between us will at all times be in accordance with these conditions.

NAME OF APPLICANT: POSITION:

SIGNATURE: DATE:

This form must be accompanied by a letterhead of your company.