

TRADE CREDIT APPLICATION



Trading Name:
Nature of Business:
Legal Entity:
Tel No:
Fax No:
Established (No Years):

Invoice Address:
Town / City:
County:
Post Code:
Contact Name:
E-Mail address:

Registered Office:
Town / City:
County:
Post Code:
Company Registration No:
Vat Registration No:

Bank reference	Solicitor Details	Accountant Details
Institution Name:	Institution Name:	Institution Name:
Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:
Town / City:	Town / City:	Town / City:
County:	County:	County:
Post Code:	Post Code:	Post Code:
Telephone No	Telephone No	Telephone No
Duration of relationship	Duration of relationship	Duration of relationship

Trade Reference 1	Trade Reference 2	Trade Reference 3 (Optional)
Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:
Town / City:	Town / City:	Town / City:
County:	County:	County:
Post Code:	Post Code:	Post Code:
Telephone No	Telephone No	Telephone No
A/C Open since:	A/C Open since:	A/C Open since:
Credit Limit:	Credit Limit:	Credit Limit:

Expected Monthly sales: £

Max amount of credit required: £

Agreement to the Company's Terms and Conditions of Sale

- 1 I have read and understand the Company's Terms and conditions for the Supply of Goods and service and agree to abide by them.
- 2 I am aware that the Company must be notified of any discrepancies or queries as follows:
 - Invoice queries or Product quantity or description problems - within 10 days of receipt
 - Faulty products - within 10 days of receipt
- 3 I confirm acceptance of the Company payment terms of 30 days from date of invoice

Signed:
Date:

Print Name:
Position:

Company Credit Control use

Credit Limit: £	Authorised by:	Customer advised:
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