

Credit Account Application

CUSTOMER'S TRADE NAME: DATE:

CUSTOMER'S FULL or LEGAL NAME:

COMPANY NUMBER: INCORPORATION DATE:

Tel: Fax:

Mobile: E-mail:

Postal Address: Delivery Address:

..... Postcode: Postcode:

Accounts Contact Name: Accounts Tel:

Accounts E-mail Address:

Details: Owner (If Sole Trader) Partners (if Partnership) Directors (if Company)

Full Name: Full Name:

Home Address: Home Address:

..... Postcode: Postcode:

Home Tel: Home Tel:

Trade References (3 Required)

Business Name: Phone:

Business Name: Phone:

Business Name: Phone:

I/we undertake to pay the account in full on or before the 20th of the month following purchase. In default of such payment I/we undertake to pay penalty interest of 2% per month on any amount outstanding and expenses which you may incur in recovering from me/us any overdue amount.

I/we authorise any person or company to provide you with such information as you require in response to your credit enquiries.

I/we further authorise you to furnish to any third party details of this application and any subsequent dealings that I/we may have with you as a result of this application being actioned by you.

The seller retains the ownership of the goods and the property in the goods shall not pass to the buyer until payment has been made for the goods and for all other goods supplied by the seller to the buyer. No goods accepted for credit unless returned within 7 days, procured parts are non returnable.

Signed: Position:

Name (Please print): Date: