

Credit Application

Company Trading Name: _____	
Company Trading Address: _____ _____	
Tel: _____	Fax: _____
Email: _____	
Nature/Type of Business: _____	
Name & Address of Company Bankers: _____ _____	
Company Bank Account Number: _____	
Account Sort Code: _____	

Non Limited Companies Only

If your company is Non-Limited please provide Owner details

Name:	_____
Address:	_____ _____
Town:	_____
Postcode:	_____

For Office Use Only

Level of Credit Limit:	_____
Account Ref:	_____
Payment Terms:	_____
Date:	_____

Company Registration

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Company VAT Number

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Accounts Dept Details

Contact Name: _____
Tel No: _____
Fax No: _____
Email: _____

