

Application for Credit Account

CONTRACT/ESTIMATE DETAILS (IF APPLICABLE)

Project Title and Location :

Trading Address

Trading Name of Business or Company: Trading Address: Tel No: Fax No: Purchase Ledger Contact: Nature of your business:	Registered Company Name: Registered Number: Registered Office Address: Date of Incorporation: VAT Number: Directors Names: Name of Parent Company (if any):
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Directors / Partners / Sole Traders, Please complete below: (Continue on separate Sheet if Necessary)

Proprietor/Director Name & Address:	Proprietor/Director Name & Address:	Proprietor/Director Name & Address:
Signature:	Signature:	Signature:

Bank Details: Credit Limit Required: £

Bank name:		
Bank Address & Postcode:		
Account Name:	Account No:	Sort Code:

Trade Reference - 1 Trade Reference - 2

Company Name: Address: Post Code: Contact Name: Tel No:	Company Name: Address: Post Code: Contact Name: Tel No:
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DECLARATION AND AUTHORIZATION

I/We acknowledge having read and accept your Terms and Conditions, Trade or Sub Contract Agreement. I/WE accept responsibility for any loss or damage to any or all of the Equipment hired by ourselves. I/We acknowledge and accept that payment is due 30 days after the date of invoice unless otherwise agreed in writing. I/We will agree that if credit is granted, I/We will pay in accordance with the above terms.

Name in Block Capitals:	Position in Company:
Signature:	Date:

Please note the following must be attached copy of insurance document for hired in plant and copy of letterhead
 Copy of driving license if sole trader or non-limited company

Copy of Letterhead	Copy of Insurance Document	Copy of D/L
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FOR DEPOT USE ONLY

Depot Code & Location:	Salesman:	Date:
Authorized by:	Signature:	