

CREDIT ACCOUNT APPLICATION FORM

Company/Applicant Name: _____
Trading Name (if different): _____
Company Registration Number: _____

Applicant's Registered Address:

Address Line 1: _____
Address Line 2: _____
City/Town: _____
Postcode: _____

Applicant's Contact Details:

Telephone: _____ Mobile: _____
Email Address: _____

Type of Business:

Sole Trader Partnership Limited Company
Other (please specify): _____

Financial Details:

Bank Name: _____
Branch Address: _____
Account Number: _____ Sort Code: _____

Trade References:

Reference 1 - Company Name: _____
Reference 1 - Contact Name: _____
Reference 1 - Telephone: _____
Reference 2 - Company Name: _____
Reference 2 - Contact Name: _____
Reference 2 - Telephone: _____
Reference 3 - Company Name: _____
Reference 3 - Contact Name: _____
Reference 3 - Telephone: _____

Applicant Declaration:

I/We hereby apply for credit facilities with the Supplier and declare that the information given in this application is true and correct. I/We authorise the Supplier to make such enquiries as it may deem necessary to assess my/our creditworthiness, including seeking references from banks, trade referees, and credit agencies. I/We acknowledge that the Supplier may disclose information about the conduct of my/our account to credit reference agencies and other

organisations. I/We agree to be bound by the Supplier's standard terms and conditions of sale, a copy of which I/We have received or have had the opportunity to review.

Authorised Signatory:

Full Name: _____

Position/Job Title: _____

Signature: _____ Date: _____

APPLICANT'S SIGNATURE

FOR SUPPLIER USE

Signature: _____

Signature: _____

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