

## **APPLICATION TO OPEN A CREDIT ACCOUNT** TRADING NAME: STATUS: COMPANY PARTNERSHIP SOLE PROPRIETOR HOW LONG IN BUSINESS: POSTAL ADDRESS FOR INVOICING: **REGISTERED OFFICE ADDRESS:** TELEPHONE NO HOW DID YOU HEAR ABOUT OUR COMPANY? FAX NO REFERRAL COMPANY REG NO **ADVERTISING** VAT REG NO OTHER (PLEASE STATE BELOW) ACCOUNTS CONTACT ACCOUNTS EMAIL CREDIT LIMIT REQUIRED: 1. TRADE REFERENCE 2. TRADE REFERENCE FAX: FAX: E-MAIL: E-MAIL: ADDITIONAL INFORMATION **BANKERS** ACCOUNT NO: SORT CODE: NAME: POSITION:

SIGNED: