



APPLICATION FOR CREDIT ACCOUNT

If partnership, please advise Names and Residential Addresses of partners	
How long in business	
Full Name or Trading Title*	
Company Registration No.	
Address (Registered Office)	
	Postcode
Telephone No.	
Business Type	
Do you require Order No.?	
Maximum Amount of Credit outstanding at one time	
Two Names & Addresses for Trade Reference	No.1
	No.2
Name and Address of Bankers	
Bank Account No.	
Contact in respect of payment	
Telephone number	
Sales Representative	
Invoice address	
Statement address	

*A company letterhead is required.

Our Terms are "Cash on the last day of the month following the month in which the goods are delivered".

PLEASE SIGN ACCEPTANCE OF TERMS AND CONDITIONS OF SALE AND INCLUDE WITH YOUR APPLICATION WHEN SENDING

Signed: _____ Date: _____

For office use only

Authorised: _____ Authorised: