

Business Credit Application

Name/Address

Last:	First:	Middle Initial:	Title
Name of Business:			
Address:			
Town:	County:	Postcode:	
Phone:	Fax:	Email:	

Company Information

Type of Business:	In Business Since:
Company Reg No:	VAT Number:
Registered address:	
Order contact:	Title:
Phone:	Email:
Accounts contact:	Title:
Phone:	Email:

Trade References

Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:
Phone:	Phone:	Phone:

ON COMPLETION OF THIS FORM, WE WILL SEND WRITTEN CONFIRMATION OF YOUR CREDIT TERMS. COMPLETING THIS FORM ASSUMES THE ACCEPTANCE OF THIS APPLICATION FOR CREDIT AND THAT YOU AGREE TO MEET THE TERMS OFFERED.

Signature: _____ Position: _____ Date: _____