

CREDIT ACCOUNT APPLICATION FORM

TRADING NAME
Trading Address
Post Code
Telephone Number
Email
Registered Name
Date of Formation
Parent Company
INVOICING NAME
Invoice Address
Post Code
Telephone Number
Email
Company Registered Number
Vat Number
Accounts Contact

Sole Traders/Partnerships please complete the table below:

Please give details of all partners and their addresses for the last 5 years (Continue on a separate sheet if necessary). The information which you provide may be disclosed to a licensed credit reference agency which will retain a record of any search. The information may be used by other lenders in assessing applications from you and other members of your household and for occasional debt tracing and fraud prevention.

Surname	Surname
Date of Birth	Date of Birth
Forename(s)	Forename(s)
Home Address	Home Address
Postcode	Postcode
Home telephone number	Home telephone number
Personal Email	Personal Email
Length of time at this address	Length of time at this address

**Please supply details of 2 companies that we may contact for trade references
(excluding associated companies and suppliers of fuel or tyres)**

Name	Name
Address	Address
Telephone Number	Telephone Number
E-mail	E-mail

Please supply your bank details

Name Of Bank	Address
Account Number	Sort Code

**Our payment terms are 30 days net monthly
ie, invoice dated 1st-31st January, payment due 1st March**

Any account that has not been paid for the month due will be put on stop and no material/skips/goods will be supplied until such time as the amount due has been paid. This applies to ALL accounts unless we have arranged separate terms, in writing.

All invoices and statements are e-mailed to customers so please ensure that we have the correct e-mail address to send them to at all times. Thank you

All Plant is hired under the CPA conditions of Hire

I / We agree to the terms of credit above and to your terms and conditions of trading

Please attach a letterhead with your application (if this is possible)

Signed:

Name:

Position in the Company

Date

**Please send this completed form to
catherine@acorntransport.net**