

Credit/ Account Application Form

Registered Name of Business: _____

Business Type: Plc Ltd Partnership Sole Trader

Details of main account contacts:

Name: _____

Position: _____

Name: _____

Position: _____

Is a Purchase Order No Required? Yes / No

Registered Office/ Invoice Address:

Post Code: _____

Main Tel No:

Accounts Contact:

Accounts Tel:

Accounts email address:

Are any of the Directors, Owners or Partners in this business un-discharged bankrupt? Yes / No

Company Registration No: _____

Date of Incorporation: _____

Company VAT No: _____

Trade Reference Name: _____

Address: _____

Current Credit Limit: _____

Trade Reference Name: _____

Address: _____

Current Credit Limit: _____

Company Bank Details:

Bank Name: _____

Sort Code: _____ Branch: _____

Acc No: _____

Please attach the following:

- A copy of your insurance for any hired plant
- A copy of the Director's ID
- A blank cheque OR a paying in slip OR a recent bank statement

(Write VOID over cheque/paying in slip or cover transactions on bank statement)

N.B. Our payment terms are Nett 30 days from date of invoice. This account form forms the basis of our contract with you and should be read in conjunction with CPA conditions. The title of goods remains the property of Woodlands (Worcestershire) Ltd until all invoices are settled.

In processing your application for credit facilities, we make enquiries of credit reference agencies and other third parties who may record those enquiries. We may also disclose information about the conduct of your account to credit reference agencies and other third parties. The information obtained from or provided to credit reference agencies or other third parties may be used when assessing further applications for credit terms, for debt collection, for tracing and for fraud prevention. I, the undersigned, hereby confirm that if credit facilities are approved the account will be paid as per your normal monthly terms.

Must be signed by a Director, Partner or Proprietor of the business.

Signed: _____ Print Name: _____ Date: _____