

# Credit Account Application Form



Legal Name of Business: \_\_\_\_\_

Trading as *(if applicable)*: \_\_\_\_\_

Business Physical Address: \_\_\_\_\_

Post Code: \_\_\_\_\_

Business Postal Address: \_\_\_\_\_

Post Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Accounts Email: \_\_\_\_\_

Entity: *(tick one)* ☐ Company ☐ Partnership ☐ Trust ☐ Sole Proprietor

Registered Office: \_\_\_\_\_

Incorporation / Registration No: \_\_\_\_\_

Year Established: \_\_\_\_\_

## Directors / Proprietors Information

Full Name: \_\_\_\_\_

D.O.B: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Full Name: \_\_\_\_\_

D.O.B: \_\_\_\_\_

Residential Address: \_\_\_\_\_

## Trade References *(please provide three)*

Company Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Company name: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Company name: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

## Declaration

I / We hereby make this application for a credit account to be opened in the name of the above entity.

I / We acknowledge receipt of and agree to the Terms and Conditions of Sale.

I / We agree to pay this account on the 20<sup>th</sup> of the month following invoice, or such terms as detailed in the Terms and Conditions of Sale or under the Construction Contracts Act 2002.

I / We agree to you contacting our trade references, and in need conducting a credit reference check.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_