

Application to Open a Credit Account

Part One - To Be Completed by Customer

Company Name: _____

Registered Address: _____

Address for Accounts: _____

Telephone Number: _____

Contact Name Accounts: _____

Contact Name Purchasing: _____

Fax Number: _____ E-mail: _____

Trading Style (eg PLC, LTD, Partnership, Sole Trader): _____

Company Registration Number (If a Limited Company): _____

Principal Activity: _____

Number of Employees: <10 11-50 51-100 >100

Bank Details

Name of Bank: _____

Address: _____

Sort Code: _____ Account No: _____

Name and address of two current trade suppliers:

Reference (1): _____

Tel: _____ Fax: _____

Reference (2): _____

Tel: _____ Fax: _____

Estimated Monthly Expenditure: _____

I/We hereby acknowledge that I/we have read and fully understand the Standard Conditions of Contract supplied which solely govern the provision of all services provided to me/us for the duration of my/our credit account and I/we agree to be bound by them.

Authorised signature: _____ **Position:** _____

Name: _____ **Date:** _____

Part Two - Office Use Only

To be completed by Sales Rep

Area Code: _____

Rep Code: _____

Rep Name: _____

Credit Limit: _____

To be completed by Accounts

Account No: _____

Terms of Payment: _____

Credit Limit Approved: _____

Authorised By: _____

Date: _____



Blackbourns



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IF APPROPRIATE FAX BACK ON: 01204 396670