

<<Company Name>> Trade Credit Application
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Full Name:	Business:
Legal Entity: --Select--	
Invoice Address:	Office:
<Town>	<Post Code>
Tel No:	Fax No:
Contact Name:	(No. of Years):
E-Mail address:	Registration No:
	ation No:

Sole Trader/Partner 1/Director	Partner 2/Director 2
Full Name:	
Home Address:	ess:
<Town>	<Post Code>

Bank Reference	Trade Reference 2
Institution Name:	Company Name:
Contact Name:	Contact Name:
Address:	Address:
<Town> <Post Code>	<Town> <Post Code>
Telephone No:	Telephone No:
Duration of Relationship:	A/C Open Since:
	Credit Limit:

Expected Monthly Sales: £	Amount of Credit Required: £
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Agreement to the	Conditions of Sale
1. I have read and understood the Company's terms and conditions and agree to abide by them	the Supply of Goods and Service and agree to
2. I am aware that the Company must be notified of any queries as follows: <ul style="list-style-type: none">• Invoice queries or Product queries – within <<10>> days of receipt• Faulty products – within <<10>> days of receipt	
3. I confirm acceptance of the Company's policy on the return of goods from date of invoice	
4. I give my consent to a credit search being carried out on my behalf on any future date. I understand this search may be disclosed to subsequent enquirers. (To be signed by an officer of the company)	
Signed:	
Date:	
Credit Limit: £	Customer Advised: