

CASH TRADE / CREDIT ACCOUNT APPLICATIONS

COMPLETED FOR CASH AND CREDIT ACCOUNT APPLICATIONS

First Name	Surname
Home Branch	Business Type
Trading Name	Proof of Business / Photo ID (Please attach photocopies)
Registered Address Line 1	Registered Address Line 2
Town / City	Postcode
Telephone Number	Mobile Number
Email	Website

CASH TRADE ACCOUNT APPLICATIONS

Please return this completed section to your local branch.

CREDIT ACCOUNT APPLICATIONS

Please complete the remainder of this form.

CREDIT ACCOUNT APPLICATION (COMPANY)

Companies House Registration Number	Year Established	Type of Organisation

Copy of Utility Bill within the last 3 Months (Must support your contact address)

Telephone Number	Mobile Number

Email	Website

Annual Turnover	Anticipated Monthly Spend	Credit Limit Requested

Order numbers on invoices?	Invoices Daily / Weekly?	Email Address for Invoices / Statements

KEY CUSTOMER CONTACTS

PAYMENTS

Name	Position

Contact Number	Email

BUYER

Contact Name	Position

Contact Number	Email

GOODS INWARDS

Contact Name	Position

Contact Number	Email

DIRECTORS/COMPANY SECRETARY/PARTNERSHIP

Full Name

Address Line 1

Address Line 2

<input type="text"/>	<input type="text"/>
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Town / City

Postcode

<input type="text"/>	<input type="text"/>
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Email

Contact Number

<input type="text"/>	<input type="text"/>
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DIRECTORS/COMPANY SECRETARY/PARTNERSHIP

Full Name

Address Line 1

Address Line 2

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Town / City

Postcode

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Email

Contact Number

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DIRECTORS/COMPANY SECRETARY/PARTNERSHIP

Full Name

Address Line 1

Address Line 2

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Email

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DIRECTORS/COMPANY SECRETARY/PARTNERSHIP

Full Name

Address Line 1

Address Line 2

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----------------------	----------------------

Town / City

Postcode

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----------------------	----------------------

Email

Contact Number

<input type="text"/>	<input type="text"/>
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TRADE REFERENCE
This section must be completed

Company Name

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Address Line 1

Address Line 2

--	--

Town / City

Postcode

--	--

Contact Number

Email

Trading Period

--	--	--

TRADE REFERENCE
This section must be completed

Company Name

--

Address Line 1

Address Line 2

--	--

Town / City

Postcode

--	--

Contact Number

Email

Trading Period

--	--	--

Let us know how we can tell you about our latest offers and promotions: Email Text

I agree to the terms & conditions

Sign & Print Names (Applicant)

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OFFICE INTERNAL USE ONLY

Branch

Sales Representative

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Credit Controller

Terms

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Other

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