

LIMITED COMPANIES ONLY

Section1 - Company Details

Company Name

Invoice Address
(inc full postcode)

Tel No

Accounts Contact
(name)

Contact Email

Purchasing
Contact (name)

Contact Email

Limited Company
Registration No

VAT No
(in Country code)

I/We hereby request that an account be opened for me/us in accordance with the above particulars. I/We agree that all orders given to you, and supplies of goods by you, shall be subject to your Standard Terms & Conditions of Sale and confirm that accounts will be paid in accordance with normal monthly settlement terms.

Date

Maximum Credit
Required (£/€)

Signed

Name (In capitals)

IMPORTANT: Please attach a sample of your letterhead when returning this form. We shall inform you of your credit limit by letter, as soon as the information you have provided above has been checked and references have been taken up.

Section2 - Internal Use Only

Approved By

Date

Credit Limit Set