ACCOUNT APPLICATION FORM

|  |  |
| --- | --- |
| Company Name |  |
| Trading as |  |
| Registered Address |  |
| Post Code |  |
| Company Reg. No |  |
| VAT No |  |
| Web site |  |
| Delivery Address*(if different)* |  |
| Post Code |  |
| Contact Name |  |
| Tel No |  |
| E-mail |  |
|  |  |
| Full Name |  |
| Position |  |
| Date |  |
| Signature |  |

*Office use only (all forms to be sent to and filed at Head Office)*

*Customer Type \_\_\_\_\_\_\_ Terms \_\_\_\_\_\_\_ Account opened on \_\_\_\_\_\_\_ by\_\_\_\_\_\_\_*

*Account No \_\_\_\_\_\_\_ Area Code \_\_\_\_ Credit Limit £\_\_\_\_\_\_\_\_ Approved by \_\_\_\_*