CREDIT S Incorporating Ledan Windows

Opened by:

Date

APPLICATION FOR A TRADE CREDIT ACCOUNT

Please complete and return to: Plastic Building Supplies Ltd 25-33 Concorde Road, Norwich, Norfolk, NR66BJ E: accounts@pbs-limited.co.uk T: 01603 484589 F: 01603 418127

www.pbs-limited.co.uk

ALL FIELDS MARKED WITH AN ASTERISK () ARE MANDATORY AND MUST BE COMPLETED IN ORDER TO PROCESS YOUR CREDIT APPLICATION	
DETAILS OF OWNER / DIRECTOR	
*Name: *Date of Birth:	
*Home Address:	
*Post Code:	
*Tel No: (Incl Code)	Fax No: (Incl Code)
*Mobile No:	*Email:
*Limited Company/Partnership/Sole Trader/Other:	
*Trading Name:	
*Accounts Address:	
*Post Code:	
*Contact Name:	*Email:
*Tel No: (Incl Code)	Fax No: (Incl Code)
*Nature of Trading Operation:	
Company Reg No: VAT Reg No:	
TRADE REFERENCES	
1. *Name:	2. *Name:
*Address:	*Address:
*Post Code:	*Post Code:
*Tel No: (Incl Code)	*Tel No: (Incl Code)
Fax No: (Incl Code)	Fax No: (Incl Code)
Email:	Email:
*Contact Name:	*Contact Name:
AMOUNT OF CREDIT REQUIRED PER MONTH: £	
Please attach a copy of the business letter heading and list the full name, home address and date of birth (if applicable) of all other Directors / Partners.	
I / We agree to comply with your settlement terms - payment being due by the end of the month following the date of invoice.	
*Completed by:	*Position:
*Signed:	*Date:
Please fill in where you heard about PBS:	
Google Online Social Media Newspaper Yell.com Representative (name)	
Somewhere else/referral (please state)	
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PBS 10/17 other third parties. The information obtained from or properties applications for credit terms, for debt collection, for trace	ovided to credit reference agencies of other third parties may be used when assessing further ing and for fraud prevention.
ADMIN ONLY	
Taken by:	Branch:
Date:	Assigned representative:
NEW ACCOUNT CODE:	

Branch Signed