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Position :



## NEW CUSTOMER ACCOUNT FORM

## **APPLICATION FOR CREDIT ACCOUNT**

Name of Business :	
Registered Address :	
Zip / Postcode :	
Company based in the EU Y/N :	
Telephone Number :	Fax Number :
Registered Company Number :	VAT Number :
Invoice Address :	
Zip / Postcode :	
Nature of Business :	
Accounts Contact Name :	Day to day Contact :
Accounts Telephone Number :	Day to day Telephone Number :
Accounts Email Address :	Day to day Email Address :
Credit Limit Applied for :	
Signed :	Name :

Date :