

Credit Application Form

Name/Address

Name of Business:	<input type="text"/>		
Address:	<input type="text"/>		
City:	<input type="text"/>	Postcode :	<input type="text"/>
		Tel No.:	<input type="text"/>

Company Information

Type of Business:	<input type="text"/>	In Business Since:	<input type="text"/>
Legal Form Under Which Business Operates:			
<input type="radio"/> Corporation <input type="radio"/> Partnership <input type="radio"/> Proprietorship			
VAT No.:	<input type="text"/>		
EORI No.:	<input type="text"/>		
If Division/Subsidiary, Name of Parent Company:	<input type="text"/>	In Business Since:	<input type="text"/>
Contact Name:	<input type="text"/>	Job Title:	<input type="text"/>
Email:	<input type="text"/>	Tel No.:	<input type="text"/>
Accounts Contact:	<input type="text"/>	Job Title:	<input type="text"/>
Email:	<input type="text"/>	Tel No.:	<input type="text"/>

Limited Companies Only

Registered Address:	<input type="text"/>
Company Registration Number:	<input type="text"/>

Bank Details

Name of Bank:	<input type="text"/>	A/C Name:	<input type="text"/>
Address:	<input type="text"/>		
Account Number:	<input type="text"/>	Sort Code:	<input type="text"/>

Trade References

Company Name:	<input type="text"/>	Company Name:	<input type="text"/>
Contact Name:	<input type="text"/>	Contact Name:	<input type="text"/>
Address:	<input type="text"/>		
Phone:	<input type="text"/>	Phone:	<input type="text"/>

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

Signature

Date