CREDIT ACCOUNT APPLICATION FORM



Company Name: Trading Name : (if applicable)	
Address	
Parent Company: (if applicable)	
Address	
Type of Business:	
Number of years trading:	Contact Name:
Telephone No:	Email:
VAT Reg No: Comp	any Registration No:
Invoice Address: (if different from above)	
BANK DETAILS	
Address	
Account Name:	
Account No:	Sort Code:



Priestley House, Spenborough Works, Union Road, Liversedge, West Yorkshire, WF15 7JZ Tel: 01924 410414, Email: sales@rubberlinings.co.uk, www.rubberlinings.co.uk

CREDIT ACCOUNT APPLICATION FORM



TRADE REFERENCE ONE		
Company Name:		
Address		
Contact Name:		
Telephone No:	Email:	
TRADE REFE	RENCE TWO	
Company Name:		
Address		
Contact Name:		
Telephone No:	Email:	
Credit Terms are Nett Monthly I HEREBY AGREE TO THE TERMS OF THE APPKICATION SET OUT AS ABOVE AND CONFIRM		
THAT THE INFO	RMATION IS ACCURATE.	
Signed:		
Print Name:		
Position	Date:	



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