

APPLICATION FOR CREDIT ACCOUNT

CUSTOMER DETAILS			
Company name:			
Address:			
Address:			
Postcode:			
Type of company:	Limited Company	□ Sole Trader	□ Partnership
Company Registration number:			
Company VAT Reg No:			
Registered Office Address (if different from above)			
Telephone:			
Fax:			
Email:			
Purchasing Contact: Purchasing Tel: Purchasing Email:			
Accounts Contact: Accounts Tel: Account Email:			
Maximum Credit Required:			

TRADE REFERENCES		
Company 1:		
Contact name:		
Address:		
Postcode:		
Telephone:		
Email:		
Company 2:		
Contact name:		
Address:		
Postcode:		
Telephone:		
Email:	_	

BANK DETAILS	
Bank name:	
Branch Address:	
Account number:	
Sort code:	

I hereby authorise Paramount Industrial Tools & Fasteners Ltd to obtain references from the above, as and when appropriate. I agree to abide by the Terms and Conditions as set out by Paramount Industrial Tools & Fasteners which include that all invoices are due to be paid within 30 days from the date of invoice, and that a Purchase Order must be given for services rendered.

Signed:	
Printed name:	
Position:	
Date:	