



T: 0161 000 0000 E: sales@caldermetalworks.co.uk

Application to open a credit account

Dear Sirs,

Please take forward our request for credit facilities with your company. I understand that you may seek status enquiries based upon the information which follows:

Trading Name of the Business:		
Full Trading Address:		
Tel Number:	Fax Number:	
Mobile Number:		
Email Address:		
Website Address:		
If Limited state Company Registration No. and Registered Office:		
Name of Proprietor/Partners if not a Limited Company:		
Address of Proprietor/Partners if not a Limited Company:		
Name of Business:	How long established:	
Full details of any other previous name under which you are trading / have trade(d):		
Contact Name in the event of an account query:	Telephone:	
Address to which invoices and statements are to be sent:		

Application to open a credit account continued...

Trade References

1. Name & Address:	2. Name & Address:	3. Name & Address:	
Tel:	Tel:	Tel:	
Fax:	Fax:	Fax:	
Bank Details			
Name of Bank & Branch:			
Bank Account Number:	Sort Code:	Tel:	
Please note that the terms are strictly 30 days net. Failure to keep to this agreement may lead to the withdrawal of the facility. By signing this application you are agreeing to these terms.			
Signature:	Name of p	erson signing:	
Date: Anticipated	d monthly spend:		
You will be advised within approximately 14 days from receipt of your application whether the facility has been granted. We reserve the right to refuse an account without the need to specify a reason. We reserve the right to withdraw the facility at any time without prior notice.			
For office use only			
Date application received:	Intec:		
Reference sent:	Sales:		
Account opened:	Letter:		

Book: