

Credit Application Form

Trading Name: _____	Registered Address: _____
Trading Address: _____	_____
_____	_____
_____	_____
Postcode: _____	Postcode: _____
Telephone No: _____	Company Reg No: _____
Fax No: _____	VAT No: _____

Credit Limit Required : _____	Account Contact Name: _____
Legal Status: <input type="checkbox"/> Public Limited Company	Buyer Name: _____
<input type="checkbox"/> Private Limited Company	E-Mail: _____
<input type="checkbox"/> Partnership	Bank Details – Name: _____
<input type="checkbox"/> Sole Trader	Address _____
<input type="checkbox"/> Statutory Body	_____
<input type="checkbox"/> Trust	Postcode: _____
If a Subsidiary,	Sort Code: _____
Company is owned By: _____	A/C No: _____

Trade Reference 1	Trade Reference 2
Contact Name: _____	Contact Name: _____
Address: _____	Address: _____
_____	_____
_____	_____
Postcode: _____	Postcode: _____
Telephone No: _____	Telephone No: _____
Fax No: _____	Fax No: _____

The above details are given to the best of my knowledge and belief and I/we will accept your trading terms and conditions of sale as stated.

I/we give my/our consent to a credit search being made on me/us as owner/partner or director of this organization both now & at any future date. I/we understand this search will be recorded by the agency & may be disclosed to subsequent enquiries.

Signature: _____ Date: _____

Name: _____ Proprietor ☐ Partner ☐ Director ☐ Authorised Official ☐



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