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## CREDIT APPLICATION FOR A BUSINESS ACCOUNT

### BUSINESS CONTACT INFORMATION

Title		Date business commenced	
Company name		<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited <input type="checkbox"/> Other	
Phone   Fax			
E-mail			
Registered company address City, Post Code			
Company Reg Number			
Estimated Monthly Spend			
Nature of Business			

### BUSINESS AND CREDIT INFORMATION

City, Post Code		Bank name:	
How long at current address?		Address	
Phone		Account Name	
Fax		Account number	
E-mail		Sort Code	

### BUSINESS/TRADE REFERENCES

Company name		Phone	
Address		Fax	
City, Post Code		E-mail	
Type of account		Other	
Company name		Phone	
Address		Fax	
City, Post Code		E-mail	
Type of account		Other	

## INVOICE DETAILS

Order numbers on invoices			
Email to send invoices to			
Email to send statements to			
Name of person who deals with account			

## BUYING DETAILS

Contact Name			
Email Address			
Phone Number			

## AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorise [Company Name] to make inquiries into the banking and business/trade references that you have supplied.

## SIGNATURES

Signature		Signature	
Name and Title		Name and Title	
Date		Date	