

**CREDIT APPLICATION FORM**

Please complete this form in BLOCK CAPITALS

All information will be treated as STRICTLY CONFIDENTIAL

|                      |   |
|----------------------|---|
| Trading Title:       | Registered Office Address:                            |
| Head Office Address: |   |
|                      |   |
|                      | Postcode:   |
|                      | No Years Trading:                                     |
| Postcode:            | VAT No:   |
| Tel:                 | Co. Reg No:   |
| Fax:                 | No of Partners:                      No of Directors: |
| Email:               | Nature of Business:                                   |

|                                     |                                |
|-------------------------------------|--------------------------------|
| Trade References: (please give two) |                                |
| Name:                               | Name:                          |
| Address:                            | Address:                       |
|                                     |                                |
|                                     |                                |
| Postcode:                           | Postcode:                      |
| Tel:                                | Tel:                           |
| Fax:                                | Fax:                           |
| Email:                              | Email:                         |
| Length of Trading Partnership:      | Length of Trading Partnership: |

|               |  |
|---------------|--|
| Bank Details: |  |
| Name:         |  |
| Address:      |  |
|               |  |
|               |  |
| Postcode:     |  |
| Account Name: |  |
| Account No:   |  |
| Sort Code:    |  |