

NEW CUSTOMER

CREDIT APPLICATION FORM



Full Company Trading Name:

Limited/Partnership/Sole Trader *(please circle one)*

Full Address:

Postcode:

Telephone No.:

Email:

Company Registration No:

Managing Director's Name:

Reg Office:

Postcode:

Sole Trader or Partnership please complete the following: If a Limited Company, please supply a Director's name

Sole Trader/Partner No.1/Director

Full Name:

Home Address:

Postcode:

Telephone No.:

Partner No.2

Full Name:

Home Address:

Postcode:

Telephone No.:

Date Business Established:

Type of Business:

Accounts Contact:

Email:

Tel No. *(if different)*:

2nd Contact Name:

Bank Reference:

Bank/BS

Address:

Postcode:

A/c:

Sort Code

- -

Name of Account:

Trade Ref 1 (NOT Mobile Phone, Fuel Supplier or Plant Hire Co)

Name:

Address:

Postcode:

Tel No.:

Email:

Trade Ref 2 (NOT Mobile Phone, Fuel Supplier or Plant Hire Co)

Name:

Address:

Postcode:

Tel No.:

Email:

Accountants Details - Name:

Contact:

Tel No.:

Date of Year End:

Please accept this form as my/our application for a credit account. Estimated monthly sales of £:

Signed:

Director/Partner/Owner. I/We give my/our consent to a credit search being made on me/us as Owner/Partner or Director of this organisation both now & at any future dates. I/We understand this search will be recorded.

Accounts Office:

Tel: 01926 678272

Fax: 01926 450461

Email: accounts@redmaterials.co.uk

Sales Office:

Tel: 01926 679272

Email: compliance@redmaterials.co.uk

Web: www.redmaterials.co.uk

Red Materials Ltd

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Tel: 01926 679272

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