

			Cr	edit	t Ar	pli	ca	tic	n			
Registered Company	/ Name				•	<u> </u>				Vat I	No.	
Trading as										Reg	No.	
Please tick		Self Employe	ed	Partnership		Private Co	mpany	Р	LC			
Postal Address												
	1	Post Code:										
Tel:	1	Fax				email						
Delivery Address												
,												
	ı	Post Code:										
Date Business Commenced					How I	How Long Under Present Owner/s						
Full Name & Home	address o	of Owners/Directors/Partners								Telephone Number		
1.												
2.												
Anticipated Monthly Purchas		202				Credit Limited Applied for			or.			
7 introspated Meritin	iy i di di lada	,3				Orodit Ell	Titted 71	ррпсат	51			
Bankers	Branch	ch Address		S	A/C	Name A/C no		A/C no.			Sort Code	
	-				<u>'</u>		<u> </u>					
Trade References												
Name		Addres	Address			Telephone			Fax			
1.												
2.												
3												
hereby declare that Who by their signat						ereby autho	orise ou	ur banke	ers to	provide	a bank reference.	
Signature of Owner/Director/Partner:								Print				
Signature of Owne	er/Director/	Partner 2: Print										
Date:												
For Office Use Onli Credit Limited	Terms		Α	/C No. Allo	ocated			Cr	edit Apr	proved by		