

GOLDEN LARCH SALES LTD

FENCING SPECIALISTS

ROMSEY ROAD, OWER, HAMPSHIRE. SO51 6AF
Telephone: Southampton (023) 80 814448 – Facsimile: (023) 80 813764

CREDIT ACCOUNT APPLICATION FORM

APPLICANT'S NAME(S):
TRADING NAME:
TRADING ADDRESS:
.....OWNED/RENTED

TEL NO: MOBILE NO:
FAX NO: E-MAIL:

IF LIMITED COMPANY.

REG ADDRESS:
.....REG NO:

IF SOLE TRADER/PARTNERSHIP.

PRIVATE NAME(S) & ADDRESSES (ES)

1.....OWNED/RENTED
2.....OWNED/RENTED
3.....OWNED/RENTED

PRINCIPAL ACTIVITIES:
DATE BUSINESS COMMENCED:ANNUAL TURNOVER: £.....
NUMBER OF EMPLOYEES: (DIRECT).....(SUB-CONTRACT)

BANKERS:SORT CODE:A/C NO:
ADDRESS:

PRINCIPAL SUPPLIER:
ADDRESS:
TEL; NO:AVGE. VALUE OF CREDIT: £.....

PRINCIPAL SUPPLIER:
ADDRESS:
TEL; NO:AVGE. VALUE OF CREDIT: £.....

DECLARATION BY APPLICANT: I / We hereby make a formal application for a credit account to an estimated monthly credit of £ and agree to abide by the terms and conditions of sale set out overleaf. I / We appreciate that payment of accounts within your stated terms is of the essence of the contract.

SIGNED: POSITION: DATE:

Please Return Completed Application to:

Golden Larch Sales Ltd,