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| Credit Application Form | | | | | | | | | | | | | | | | | |
| Company Name | |  | | | | | | | Trading Name | | | | | | | |  |
| **Address for Statement** | | | | | | | | | **Address for Invoice/Delivery** | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | |
| Postcode: | | | | | | | | | Postcode: | | | | | | | | |
| **Accounts Payable** | | | | | | | | | **Account order queries** | | | | | | | | |
| Contact Name | | | |  | | | | | Contact Name | | | | | | |  | |
| Telephone Number | | | |  | | | | | Telephone Number | | | | | | |  | |
| Fax Number | | | |  | | | | | Fax Number | | | | | | |  | |
| Email Address | | | |  | | | | | Email Address | | | | | | |  | |
| Website Address | | | |  | | | | | Website Address | | | | | | |  | |
| **Type of Business** | | | | | | | | | | | | | | | | | |
| Sole Trader | | | | | | Limited Liability Partnership | | | | | | | | Partnership | | | |
| PLC | | | | | | Limited Company | | | | | | | | Registered Charity | | | |
| Company Registration Number | | | | |  | | | | | | Company VAT Number | | | | |  | |
| **Company Name** | | | | **Contact Details** | | | **Telephone #** | | | | | **Fax #** | | | | | **Account #** |
|  | | | |  | | |  | | | | |  | | | | |  |
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| **Bank References** | | | | | | | | | | | | | | | | | |
| Institution Name | | |  | | | | | | | Institution Name | | | | |  | | |
| Checking Account # | | |  | | | | | | | Address | | | | |  | | |
| Contact Person | | |  | | | | | | | Phone Number | | | | |  | | |
| Home Equity Loan | | |  | | | | | | | Address | | | | |  | | |
| Contact Person | | |  | | | | | | | Phone Number | | | | |  | | |
| Savings Account # | | |  | | | | | | | Address | | | | |  | | |
| Contact Person | | |  | | | | | | | Phone Number | | | | |  | | |
| In processing your application for credit facilities, we make enquiries of credit reference agencies and other third parties who may record those enquiries. We may also disclose information about the conduct of your account to credit reference agencies and other third parties. The information obtained from or provided to credit reference agencies or other third parties may be used when assessing further applications for credit terms, for debt collection, for tracing and for fraud prevention. I, the undersigned Hereby confirm that if credit facilities are approved the account will be paid as per your normal monthly terms.  **Must be signed by a director, partner or proprietor of the business** | | | | | | | | | | | | | | | | | |
| Signed |  | | | | | | | Date | | | | |  | | | | |
| Print First Name |  | | | | | | | Print Last Name | | | | |  | | | | |

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