

Credit Account Application Form

Please complete all sections in BLOCK CAPITALS and sign the declaration. Please contact us with any questions

Credit Limit required

Currency (tick) £ GBP € EUR

Business Name

Trading Name (if applicable)

Business / Billing Address

Delivery / Trading Address (if applicable)

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Postcode

Postcode

Buyer / Sales Contact

Accounts Contact

Telephone Number

Telephone No.

email

email

Select one: Limited Company Partnership Sole Trader

Company Registration No.

VAT Registration No.

Owner or Partner

Second Partner

Full Name

Full Name

Date of Birth

Date of Birth

Home Address

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Home Address

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

REFERENCE -SUPPLIER ONE

REFERENCE -SUPPLIER TWO

Name

Name

Tel:

Tel:

Address

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Address

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

DECLARATION BY CREDIT APPLICANT

We hereby request you to open an account with credit terms.

Being an authorised Officer of this business, I do agree that payment of all accounts will be received by you (our supplier) within your stated credit terms (as shown overleaf). We appreciate that adherence to this obligation is the essence of the contract between us and that failure to comply with this declaration may result in your account being put on hold and at the end of the second month will result in a surcharge of 2.5% of the overdue balance being automatically debited to the account. I / we also confirm that we have read, understood and agree to the terms and conditions as printed on the back of this form in their entirety; and that we have retained a copy of these terms and conditions for our files.

I / We appreciate that adherence to this obligation is the essence of the contract between us.

Name

Name

Position

Position

Signed

Signed

Date

Date

Post your application to 49-63 Spencer Street, Hockley, Birmingham, B18 6DE or scan & email: accounts@bettsmetals.co.uk