

## **APPLICATION FOR MONTHLY CREDIT ACCOUNT**

\*\*PLEASE ATTACH A SIGNED COPY OF YOUR COMPANY LETTERHEAD AND UTILITY BILL (NOT MOBILE PHONE)\*\* please fill out the fields below and send the form to accounts@broughtonplanthire.co.uk

COMPANY N	NAME							
ADDRESS								
POST CODE								
TEL NO FAX NO								
Status		Limited Company		Sole Trad	ler		Partnership	
If Company: REGISTERED NO						DATE	OF REGISTRATION	
If Sole Trade	Sole Trader/Partnership: NAME & ADDRESS OF ALL PARTNERS							
INVOICE/STATEMENT EMAIL ADDRESS (if different from above)								
NO OF YEARS AT THIS ADDRESS								
CONTACT NAME:								
POSITION:					TEL NO:			
TOTAL CREDIT REQUIRED (£)					NATURE OF BUSINESS			
BANKERS NAME & ADDRESS								
				POST CODE				
ACCOUNT NO					SORT NO			
TRADE REF No 1.					TRADE REF No. 2			
NAME					NAME			
ADDRESS				ADDRESS				
TEL NO					TEL NO			
TEL NO					TEL.NO			
MOBILE NO EMAIL ADDRESS				MOBILE NO EMAIL ADDRESS				
CONTACT NAME					CONTACT NAME			
SIGNATURE					POSITION			
NAME					DATE			
I have received a copy of your terms and conditions and have read and understood them								
That's received a copy of your terms and conditions and have read and understood them								
Can you please tell us how you heard about us?								
Sales Rep ☐ Social Media ☐ Website ☐ Other ☐ please state:								