

Hucknall Road
 Sherwood
 Nottingham
 NG5 1FD



Credit Account Application Form		(Please complete in block capitals)	
Payment Terms – 30 days		Date:	
Name: (In Full)			
Registered Company Number:			
Address from which the account will operate:			
Address of the registered office if a limited company:			
Home address of both partners or proprietor if a partnership or sole trader:			
Business Telephone Number:		Business Fax Number:	
Business Email Address:			
Name and address of two businesses with whom you have a credit account of comparable size and have been trading with for at least 3 years	Ref 1		
	Ref 2		
Maximum amount of credit required at any one time:		£	
Please state the nature of your business:		How long have you been trading?	
Contacts name:		Position:	
Signature:			
We will make a search with credit reference agency which will keep a record of that search and will share that information with other businesses. We may also make enquiries about the principal directors with a credit reference agency.			
For internal use only. Please do not complete.			
Manager's authority:		Date:	Recommended credit limit: £
Plumline Contact info: Phone number: 0115 962 9444 Fax number: 0115 969 1213		Langar Contact info: Phone number: 0115 962 2617 Fax number: 0115 969 1213	