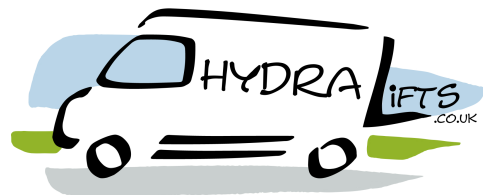


# Credit Account Application Form

Bristol Hydralifts Ltd



## Company Details

Company Name:

Trading Name:

Address:

Postcode:

Telephone:

Fax:

Email:

Nature of Business: *(please tick)*

- ☐ Personal    ☐ Sole Trader    ☐ Partnership    ☐ Trust  
☐ Limited    ☐ PLC    ☐ Charity    ☐ Other

If other please specify:

Company No.:

VAT No:

Credit Amount requested: £

## Accounts & Invoicing

Contact Name:

Billing Address:

Postcode:

Telephone:

Fax:

Email:

Perferred Invoicing Method: *(please tick)*

- ☐ Email    ☐ Post

Preferred Statement Method: *(please tick)*

- ☐ Email    ☐ Post

Email for invoices is different from above:

Email for statements if different from above:

## Bank Account Details

Bank Name:

Address:

Postcode:

Telephone:

Fax:

## Trade Reference #1

Company Name:

Address:

Postcode:

Telephone:

Fax:

## Trade Reference #2

Company Name:

Address:

Postcode:

Telephone:

Fax:

## Confirmation

I confirm that I wish to open a credit account and agree to the above information being used to assist in the opening of a credit account with Bristol Hydralifts Ltd. I certify that the above information is true and correct, that I am authorised to make this application for credit and that, if credit facilities are approved, the account will be paid as per Bristol Hydralifts Ltd 30 Days payment terms.

Name:

Position:

Signature:

Date: