



A fresh approach to recruitment

CREDIT ACCOUNT APPLICATION

Please complete all sections in block capitals

A Full Trading Name & Address	Tel No:
	Fax No:
	Contact Name: (for payments)
	Email Address: (for statements etc)
B If Ltd or Plc state Registered Office address	Company Reg No:
	VAT No:
C Alt. Address for Invoices / Statements	Bank Name & Address:
	Account Name:
	Account Number:
	Sort Code:
For the attention of:	

Please indicate addresses for (please circle):	Special Invoice Requirements (please tick):
Invoices A B C	Order No's on invoice <input type="checkbox"/>
Statements A B C	One Invoice per temp <input type="checkbox"/>
	Please note our invoices are issued weekly

The following undertaking must be signed by a duly authorised signatory of a Ltd company or a principal of a business.

I / We confirm that the above information is correct and duly acknowledge receipt of your Terms of Business to which I / We agree to be legally bound.

Name (s)..... Signature (s).....

Position..... Date

Settlement Terms: 30 Days from the date of Invoice