

Please complete in Ball Point Pen and attach a Letterhead with your application

CREDIT APPLICATION FORM

APPLICATION FOR A CREDIT FACILITY

Date Received _____

Credit Account Change of Address Cash Account Change of Title

TO BE COMPLETED BY (CUSTOMER /SALES REPRESENTATIVE)

Full Legal Title and Trading Name: _____

Sole Trader Partnership LLP
 Limited Company Co Reg. No PLC (please tick where appropriate)

STATEMENT ADDRESS:

Name: _____
Street: _____
Town: _____
Country: _____
Post Code _____ Phone Number: _____

DETAILS OF BUSINESS:

Nature of Business: _____ Date Established _____

Number of Employees: _____

Details of any other Companies/Business managed by the Principals of this application current or past:

B. IF YOUR APPLICATION IS FOR A LIMITED LIABILITY COMPANY, THE CONTINUING GUARANTEE BELOW MUST BE SIGNED BY A DIRECTOR OF THE COMPANY.

To: CRS Building Supplies Ltd, Cheddar BS27 3RU

In consideration to you agreeing to grant credit facilities to the Company, I hereby unconditionally guarantee the due and punctual performance and observance by the Company of its obligations herein under your Conditions of Sale and agree to indemnify and keep you indemnified against any breach or non-observance thereof by the Company.

Name:

Position:

Signature: **Date:**

METHOD OF PAYMENT:

Cheque BACS Other

If other, please specify : _____

I/WE REQUEST YOU TO OPEN A CREDIT ACCOUNT IN THE NAME OF:

With a Proposed Credit Limit of: _____ per month

Agreed Credit Period: _____ 30 _____ days

TRADE REFERENCES:

I/We authorise you to take up references at any time from the under mentioned bank and trade sources.
NB: (We will make searches with a credit reference agency, which will keep a record of those searches and will share that information with other businesses. We may also make enquiries about the principal directors with a credit reference agency.)

1. Name: _____ Account Number _____

Full Address: _____

2. Name: _____ Account Number _____

Full Address: _____

3. Name: _____ Account Number _____

Full Address: _____

BANK DETAILS:

Name: _____

Address: _____

Sort Code: _____ Account Number: _____

CONTACT FOR PAYMENT:

Name: _____

Position: _____

Tel No: _____ Fax No: _____

e-mail address: _____

DETAILS OF OWNER/PARTNERS/DIRECTORS:

I/We have read, understood and retained a copy of your conditions of sale (including the retention of title clause) and agree to trade in accordance with these for any goods supplied.

I/We accept that title to all goods supplied to us will remain vested in **CRS Building Supplies Ltd** until all amounts outstanding from us on any account have been paid in full to **CRS Building Supplies Ltd**

I/We also agree to comply with your settlement terms (specified within your conditions of sale).

I/We understand that **CRS Building Supplies Ltd** have the statutory right to Charge interest under the Late Payment of Commercial Debts (Interest) Act 1998 as amended by The Late Payment of Commercial Debts Regulations 2002, if settlement terms have not been adhered to.

1	Name:		Signature	
.				
	Home Address:			
2	Name:		Signature	
.				
	Home Address:			
3	Name:		Signature	
.				
	Home Address:			