

London Road  
Chapel Yard  
**HOLYHEAD**  
Anglesey  
LL65 2PB



Accounts Office  
London Road  
**HOLYHEAD**  
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Telephone No. +44 (0) 1407 760232  
Fax No. +44 (0) 1407 761066

Telephone No. +44 (0) 1407 760232  
Fax No. +44 (0) 1407 769313

## APPLICATION FORM TO OPEN A CREDIT ACCOUNT

**PLEASE ANSWER IN FULL AND RETURN TO FAX NUMBER 01407 769313**

1. TRADING NAME \_\_\_\_\_
2. TRADING ADDRESS \_\_\_\_\_
- TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_
3. DIRECTORS \_\_\_\_\_
4. CO. REG NO. \_\_\_\_\_ 5. No. OF YEARS IN BUSINESS \_\_\_\_\_
6. VAT REGISTRATION NUMBER \_\_\_\_\_
7. IF PART OF A **GROUP** PLEASE NAME ULTIMATE HOLDING COMPANY AND ADDRESS \_\_\_\_\_
8. APPROXIMATE AMOUNT OF MONTHLY CREDIT REQUIRED \_\_\_\_\_
9. ADDRESS WHERE INVOICES ARE TO BE SENT (COMPLETE IF DIFFERENT TO TRADING ADDRESS) \_\_\_\_\_
10. ADDRESS WHERE STATEMENTS ARE TO BE SENT (COMPLETE IF DIFFERENT TO TRADING ADDRESS) \_\_\_\_\_
11. DO YOU REQUIRE POD'S WITH INVOICE? (**DELETE**) YES / NO
12. DOES THE POD HAVE TO BE SENT TO A DIFFERENT ADDRESS? (**DELETE**) YES / NO
13. OTHER INFORMATION REQUIRED ON GSG INVOICE \_\_\_\_\_
14. ADDRESS WHERE POD'S ARE TO BE SENT (COMPLETE IF DIFFERENT TO TRADING ADDRESS) \_\_\_\_\_

15. TRADE REFERENCES (**DO NOT USE** OIL OR TYRE COMPANIES AS REFERENCES)

**PLEASE SUPPLY NAME, TELEPHONE NUMBER AND FAX NUMBER ONLY**

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

16. BANKERS \_\_\_\_\_
- SORT CODE \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_
17. NAME OF PERSON WHO ORIGINATES PAYMENTS \_\_\_\_\_
18. **CONTACT DETAILS FOR ABOVE** \_\_\_\_\_
19. DOES YOUR COMPANY OPERATE ON **B.A.C.S.** YES / NO

### **ACCOUNTS PAYABLE WITHIN 30 DAYS OF INVOICE DATE UNDER BIFA 2005 TERMS & CONDITIONS**

SIGNATURE \_\_\_\_\_ PRINT \_\_\_\_\_

**FOR OFFICAL USE ONLY** DATE \_\_\_\_\_ PROPOSED BY \_\_\_\_\_

APPROVED BY \_\_\_\_\_

CREDIT LIMIT \_\_\_\_\_ per Month ACCOUNT NO. \_\_\_\_\_