

Commercial Vehicle Wheel Hub & Bearing Specialists

CREDIT ACCOUNT APPLICATION

ACCOUNTS BUSINESS CONTACT INFORMATION			
Company Name (In Full)		Type of Company: <input type="checkbox"/> Limited Company <input type="checkbox"/> Sole Trader <input type="checkbox"/> Partnership <input type="checkbox"/> Other (Please Specify)	
Trading Name (If applicable)			
Company Registration No			
Year business established			
Accounts Tel No			
Accounts Fax Number			
Accounts Email Address		CREDIT LIMIT REQUIRED : £	
Registered Company Address		Statement Address	
Post Code		Post Code	
SALES BUSINESS CONTACT INFORMATION			
Delivery Address: (If different from above)		2nd Delivery Address (If Required)	
Post Code		Post Code	
Sales Contact		2nd Sales Contact	
Sales Tel No		2nd Sales Tel No	
Sales Fax No		2nd Sales Fax No	
Sales Email		2nd Sales Email	
TRADE REFERENCES			
Company Name		Phone	
Address		Fax	
Post Code		Email	
Company Name		Phone	
Address		Fax	
Post Code		Email	
CREDIT AGREEMENT			
1. Credit terms are strictly 30 days from the date of invoice 2. Claims arising from invoices must be made within seven working days 3. All applications must be completed in full and accompanied by an official letterhead. 4. By submitting this application, you authorise Stud Extract Limited to make inquiries into the trade references that you have supplied 5. You authorise Stud Extract Limited to record and hold your Company information within their records and accounts system. (Tick Here) <input type="checkbox"/>			
SIGNATURES			
Signature		Signature (if Partnership)	
Name & Title		Name & Title	
Date		Date	