

Unit 8 Ladywood Works Leicester Road Lutterworth Leicestershire LE17 4HD

Sales: 01455 550515 Fax: 01455 550122

Email: <u>sales@fossewaytapes.co.uk</u> Web: <u>www.fossewaytapes.co.uk</u>

Credit Account Application Form

Company Name:	If you are a Limited company, please complete:
· · · ·	Registered No.:
Address:	Registered Office:
Postcode:	Postcode:
Telephone No.:	
Fax No.:	Trada Deference (1)
Contact Name:	Trade Reference (1)
VAT Number:	Name:
Email:	Address:
Website:	
If you are a Partnership/Sole Trader, please give full	T I I N
names and addresses of all proprietors/partners of the	Telephone No.:
business on a letterhead.	Fax No.:
Bank Name:	Contact:
Address:	Trade Reference (2)
	Name:
	Address:
Postcode:	
Telephone No.:	
Sort Code:	Telephone No.:
Account No.:	Fax No.:
Account Name:	Contact:
Credit Limit required:	
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We acknowledge that all invoices in respect of the account are due for settlement within 30 days from Invoice date and agree to pay the account in accordance with these terms.

Signed:	
5	

Name: (Print) _____

Position:

(Must be signed by authorised officer, partner or proprietor)

Date:

VAT Registration No 485 7687 76 Company Registration No. 5006127













