

HBS Credit Account Application Form

Sole Traders and Partnerships Please Skip To Page 2

Company Registered Name.....

Trading Name (If different).....

Company Reg. Number..... VAT Registration Number.....

Registered Office Address.....

.....

.....

Post Code.....

Trading/Invoice Address

.....

.....

Post Code.....

Landline Telephone No..... Fax:.....

Contact name for accounts.....

Telephone number for accounts.....

Email for accounts (Invoices/Statements).....

Contact name for sales.....

Telephone number for sales.....

Email for sales (Quotes/Pricing/Products/Offer).....

Nature of business.....Credit limit required £.....

Sole Traders/ Partnerships

Trading Name.....
Trading Address (For invoicing).....
.....
.....Post Code.....
Vat Reg. Number.....Years Trading.....
Nature of business.....Credit limit required £.....
Landline telephone number..... Fax.....
Mobile.....

Contact name for accounts.....
Telephone number for accounts.....
Email for accounts (Invoices/Statements).....

Contact name for sales.....
Telephone number for sales.....
Email for sales (Quotes/Pricing/Products/Offer).....

If sole trader just fill in partner 1. Please list ALL partners.

Partner 1/Sole trader
Full name..... DOB...../...../.....

Home address.....
.....
.....Post code.....

Partner 2
Full name..... DOB...../...../.....

Home address.....
.....
.....Post code.....

Partner 3
Full name..... DOB...../...../.....

Home address.....
.....
.....Post code.....

Any further partners please list details on separate sheet.

Email addresses will only be used for mail essential for our business to business relationship

References

References

Name and address of bank.....
.....
.....

Account Name.....A/c Sort code.....A/c No.....

Trade Ref 1

Name.....

Address.....

.....Post code.....

Tel. No..... Contact Name:.....

Length of time trading.....Credit Limit.....Average Monthly Spend.....

Trade Ref 2

Name.....

Address.....

.....Post code.....

Tel. No..... Contact Name:.....

Length of time trading.....Credit Limit.....Average Monthly Spend.....

Trade Ref 3

Name.....

Address.....

.....Post code.....

Tel. No..... Contact Name:.....

Length of time trading.....Credit Limit.....Average Monthly Spend.....

The applicant, by signing this form agrees for enquiries to be made to the given references and bank about their credit worthiness and payment record. Information received will be strictly confidential and will be for our use only and not passed to any third party.

Please return the completed form with a copy of your letterhead to;

J A Bunyan Group Accounts
P.O. Box 853
Enfield
EN3 7ZY

The applicant must have the authority to arrange credit facilities for the company.

Applicant Name.....

Position.....

Signature.....Date.....

We will endeavour to process this application a.s.a.p. However delays may be due to reference delayed replies.

Any queries please contact our accounts department on;

Tel: 03330 300404

Email accounts@jabunyan.co.uk



Heating & Bathroom Supplies

Plumbing & Heating Merchant To The Trade

Tel: 03333 444232

Email: mail@hbssales.co.uk