

Credit Account Application

To enable our Credit Control Department to open a credit account for your company please complete this Account Application Form. The Information on this form will be used to carry out credit checks. All information given shall be treated with the strictest of confidence and will not be disclosed to any third parties.

Company Name:

Trading As:

Company Status Plc Ltd LLP Partnership Sole Trader

Company Reg No: **VAT Reg No:**

Website: **Tel:**

Trading Address	Invoice Address (If different)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Postcode: **Postcode:**

Accounts Department Contact Information

Please enter contact details of your accounts department.

Contact Name: **Position:**

Direct Tel: **Email:**

Credit Limit

Please enter maximum amount of credit required including VAT:

This maximum amount will be confirmed or adjusted after credit checks have been conducted.

Signed: **Date:**

Name: **Position:**

Please return by either fax: 01744 801002 or email: accounts@gpw.uk.com

GPW Office Use Only

Credit: **Assigned Credit:**

Account Code: **Authorised:**

