APPLICATION TO OPEN A CREDIT ACCOUNT

CAT ACCESS SOLUTIONS

Full Company Name:	Tel No:
Trading Address:	Fax No:
	Contact Name:
Post Code:	Mobile/Direct Line:

If a Limited Company please give registered office address

	Company Registration No:
	Nature/Type of Business:

If not a Limited Company, please give name and private addresses of the Proprietor/Partners.
(If you have been at your current address less than 3 years please state previous addresses)

1.	2.	3.
Date of Birth	DOB	DOB

This section must be completed on all applications

Amount of credit required:	Sale £		Hire £	per month

Trade Reference 1

Name:
Address:
Tel No:
Fax No:

Trade Reference 2

Name:
Address:
Tel No:
Fax No:

Bankers Details

Bank Name:	Bank A/C No:
Address:	Sort Code:
Post Code:	

This section must be completed on all applications

How did you hear about us? (Please Tick)
Publication Article ☐ Sales Person ☐ Advertising ☐
Mailshot ☐ Referral ☐ (Other pl. specify) _____

Bankers Details

Bank Name:	Bank A/C No:
Address:	Sort Code:
Post Code:	

This section must be completed on all applications

How did you hear about us? (Please Tick)
Publication Article ☐ Sales Person ☐ Advertising ☐
Mailshot ☐ Referral ☐ (Other pl. specify) _____

I/We apply for a credit account and give you permission to contact the references submitted.
I/We agree that all transactions will be conducted in accordance with your Conditions of Hire and Sale which I/We understand are available upon request.

Name: (BLOCK CAPITALS)	Auth. Signature:
Date:	Position:

We will make a search with a credit reference agency, which will keep a record of that search and will share that information with other businesses.
We may also make enquiries about the principal directors with a credit reference agency

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