



# ConnectorCo

2A Albany Park, Frimley Road, Camberley, Surrey GU16 7PL

**T:** 01276 405320

**F:** 01276 405329

## CREDIT ACCOUNT APPLICATION FORM

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_  
\_\_\_\_\_

Post Code: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Accounts Email:\* \_\_\_\_\_

Incorporation Date: \_\_\_\_\_

Company Reg No: \_\_\_\_\_

Contact for Accounts: \_\_\_\_\_

Contact for Purchasing: \_\_\_\_\_

Partners names and addresses (required for non-limited companies):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### TRADE REFERENCES:

1. \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

2. \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

### BANK DETAILS:

Bank Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Post Code: \_\_\_\_\_

Account No: \_\_\_\_\_ Sort Code: \_\_\_\_\_

Required Credit Amount: \_\_\_\_\_

We agree to abide by your terms of trading which require payment in full 30 days net monthly.

(Please confirm agreement by returning this form with an authorised signature)

Authorised Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Position Held: \_\_\_\_\_

\*The Accounts Email address must be completed for us to be able to open a Credit Account.

