

14 Throop Close BH8 0DD, Bournemouth United Kingdom Tel. 01202248370 sales@swatengineering.co.uk

Credit Account Application Form

Completion of this form imposes no obligation to offer an account, nor on the applicant to accept such if offered. Any information given through the medium of this form will be regarded as strictly confidential and not to be divulged to any third party without the applicant's permission.

TRADING NAME				
TRADING ADDRESS				
TEL NO	FAX NO			
EMAIL				
WEB ADDRESS				
LIMITED COMPANY PA	RTNERSHIP SOLE TRADER			
COMPANY REG. NO VAT NO				
INVOICE ADDRESS (IF DIFFERENT)				
TYPE OF BUSINESS				
DATE BUSINESS STARTED				
CREDIT LIMIT REQUIRED				
BANKERS NAME & ADDRESS				
ACCOUNT NO	SORT CODE			



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	names and addresses of two trade references, at least one of which the supplier that they are wiling to submit references prior to
Company Name:	Contact Name:
Company Address:	Tel:
	Email:
Company Name:	Contact Name:
Company Address:	Tel:
	Email:
<u>Declaration</u> I / We have read and accept the a	nforementioned Terms and Conditions
PRINT NAME	DATE
JOB TITLE	SIGNATURE
	OFFICE USE ONLY
Account Reference	Credit Limit
Authorised	Date

Please scan end mail this form with a copy of your company letterhead to sales@swatengineering.co.uk