

**APPLICATION FOR CREDIT FACILITIES****COMPANY NAME:** \_\_\_\_\_**PLEASE NOTE: ALL AREAS MUST BE FILLED IN.**

	<b>DATE:</b>
	<b>SALES REPRESENTATIVE/AGENT:</b>
COMPANY REGISTRATION NO:	<b>ACCOUNT NO:</b>
OWNERS NAME:	
REGISTERED OFFICE:	INVOICE/STATEMENT ADDRESS IF DIFFERENT FROM REGISTERED OFFICE
ADDRESS:	
POSTCODE:	POSTCODE:
TELEPHONE No:	TELEPHONE No:
FAX:	FAX:
Email:	
VAT No:	ACCOUNTS CONTACT NAME:
BUYERS CONTACT NAME:	
SPECIAL INSTRUCTIONS:	DELIVERY ADDRESS:
	Tel no :
	Fax no :

**TRADE REFERENCES:** Please select two Companies with whom you deal frequently

Company Name:	Company Name:
Address:	Address:
Tel no:	Tel no :
Fax no:	Fax no :

**BANK STATUS ENQUIRY – This section MUST be completed .**

Enquiry To: The Manager	Enquiry From:
Bank Name	D. GURTEEN & SONS LTD
Address	CHAUNTRY MILLS
	HAVERHILL
	SUFFOLK
Postcode:	
**Sortcode:	CB9 8AZ
**Bank Account No:	Contact Name: Mr. A. J. Smart
Information Requested on:	Information Requested:
Customer:	Purpose: <b>NORMAL TRADE</b>
Address:	Total Amount: £2000.00
	Frequency: <b>MONTHLY</b>
Postcode	

**CONSENT**

To be SIGNED by the Customer who is the subject of the enquiry,  
In accordance with the signing held by the Bank.

I/We \_\_\_\_\_.

Authorise \_\_\_\_\_ Bank Plc. To provide a status enquiry on me/us

I/We understand that a copy of the Bank's reply can be sent to me/us upon request

\*\*Signed: \_\_\_\_\_ Date: \_\_\_\_\_