

Credit Account Application Form

Company details:

Company Name		Main Phone/ Switchboard	
Co. Registration No		Fax No	
Main Sales Contact		Contact Phone No & Email address	
Main Accounts Contact		Contact Phone No & Email address	
Accounting / Invoice Address		Delivery Address	
Anticipated Monthly Credit Required	£	Turnover last FY	£

Bank details:

Name of Bankers	
Bank Address	
Bank Telephone Number	
Account Number	
Sort Code	

Trade References:

Full name, address and contact details of two trade references:

Company Name 1		Company Name 2	
Address		Address	
Contact name		Contact name	
Telephone No.		Telephone No.	

DECLARATION: I hereby submit the above information for the sole purpose of opening a Credit Account with Atlantic Diesel Services Limited (A.D.S.). I acknowledge that all orders are accepted by A.D.S. in accordance with their terms and conditions and agree that my company shall be bound by them in all transactions. Goods shall remain the property of A.D.S. until paid for in full.

PLEASE DON'T FORGET TO SIGN THE APPLICATION BEFORE RETURNING IT TO A.D.S.

Print Name		For A.D.S. Use	Account Manager
Signed		Account Number	
Position		IND CLASS	
Date		Credit Limit	