

# APPLICATION FOR CREDIT ACCOUNT

Please supply the following information to assist us in setting up your credit account. **Please fill in using BLOCK CAPITALS and return with a copy of your letter-headed paper. Please note** that new customers must supply payment in advance until satisfactory references have been received.



## Company Name

Address: \_\_\_\_\_ E-Mail \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Post Code \_\_\_\_\_ Contact \_\_\_\_\_

Telephone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

Company VAT No: \_\_\_\_\_

Is the above address to be used for invoicing? Yes No

If No, please enter invoicing details below:

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

\_\_\_\_\_

\_\_\_\_\_

Post Code \_\_\_\_\_ Contact \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No: \_\_\_\_\_

Is Company Limited? Yes No If Yes please fill out register details

Registered Address: \_\_\_\_\_ Registration No: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Post Code: \_\_\_\_\_ Date of incorporation: / /

If not Limited Co. please state Names(s) and address(es) of owner(s):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Company Bankers: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

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

How long has the company been trading? \_\_\_\_\_

Please supply two trade references:

1) \_\_\_\_\_ 2) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_ Email \_\_\_\_\_

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

\_\_\_\_\_

Please state approximate amount of credit required per month: \_\_\_\_\_

I / We hereby apply to open a Trade Credit Account and accept that all transactions shall be governed by the Baker Self Adhesive Label Co Standard Terms and Conditions, as amended from time to time.

\_\_\_\_\_

Authorised Signatory: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_

(to be the Proprietor or Director of the Company)

LABELS 01277 281900 | MATERIALS 01277 281910

[www.bakerlabels.co.uk](http://www.bakerlabels.co.uk) | [www.bakermaterials.co.uk](http://www.bakermaterials.co.uk)

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