

Application to Open a Credit Account John Hood & Co (Copper Alloys) Ltd

CONTACT INFORMATION	
Person responsible for payment of account	
Name:	
Tel No:	Fax No:
E-Mail:	

COMPANY INFORMATION	
Company Name:	
Address:	Tel No:
	Fax No:
	E-Mail:
Post Code	
Date company established:	
Company Registration Number:	
Registered Address if different to above:	
Annual Turnover:	
Company VAT Number:	
Company EORI Number:	
Trading Type	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Ltd Company <input type="checkbox"/> Other

BANK DETAILS	
Name:	
Address:	
Sort Code:	Account Number:
Time with bank:	

CREDIT	
Request Credit Limit	
£	
Expected Spend	
£	

LEGAL	
Is your company subject to any litigation ?	
YES	If yes, please explain below.
NO	
Type of Litigation :	

BUSINESS/TRADE REFERENCES	
Please give two current trade referees	
1. Company Name:	
Address:	
Post Code:	
Tel No:	
Fax:	
E-Mail:	
Contact Name:	
2. Company Name:	
Address:	
Post Code:	
Tel No:	
Fax:	
E-Mail:	
Contact Name:	

AGREEMENT	
<p>1. All invoices are to be paid within 60 days after the end of the month of the invoice date.</p> <p>2. Claim arising from invoices must be made within seven working days</p> <p>3. Orders are placed subject to our terms and condtions which are enclosed and also available on our website www.manchestermetalsgroup.co.uk</p>	
RETENTION OF TITLE	
All goods remain the property of John Hood & Co (Copper Alloys) Ltd until payment is received in full	
<p>I declare the above information is true, correct and complete and that I am authorised to open a credit account by my company.</p> <p>I agree to a full credit investigation via the trade and bank references supplied as well as the use of any credit reports as supporting evidence.</p> <p>I have read and agree to the terms and condtions attached with this application</p>	
Applicant -Duly Authorised Signatory	
Signed:	Date:
Name:	Position

INTERNAL ACCOUNTS USE ONLY Director/Authorised Signatory sign off	
Details Checked and Correct Y/N	
Amendment to Payment Terms : Y/N	
Terms:	
Added to SAGE and ERP Y/N	
Signed:	Date:
Name:	Position