 **Credit Application Form**

Depot Date

Please complete in BLOCK LETTERS Name of person authorised to open this

account

|  |
| --- |
| **Business Name** |
| *(if not a limited company, section 2 MUST be completed)* |
| **Section 1** |
| Trading Name: |  |  | Nature of Business: |  |
| Registered Office Address: |
| Company Registration No: |
| Tel No. (inc. STD code): |  |  | Year Business Started: |
| Invoice / Statement Address: |
| Tel No. (inc. STD code): |  | Fax No: |  |  |
| Statement Required |  | : YES/NO |  | E-Mail Address: |  |
| **Section 2** |
| Non-Limited Business |
| Type of Organisation: | Sole Trader |  | Partnership |
| Name: |  |  |  |  |  |  |
| Home Address of Owner / Partners: |
| Years at Present Address: | Telephone Number (inc. STD code): |  |
| **Section 3 (Not Required if Transport Only Account)** |
| **INSURANCE:** | Do you hold Insurance for Hired in Plant? | \* YES / NO |
| Insurance Company Name: |  |  | Broker Tel No. (inc STD code): |
| Policy Number: |  |  |  | Expiry Date: |  |
| Limit Per Item: |  |  |  | *\* if yes, Please supply policy schedule.* |
| Name, Address, Telephone No. & Fax no. Trade References (inc. STD code): |
| 1. | ……………..……………………………………………………………………………………………………………… |
| 2. | …………...…..…….……………………………………………………………………………………………………… |
| Are Order Numbers Required: | Yes / No |  |  |  |
| **Bank Details:** |  | Account Name: | ………………………………………………………….. |
| Name & Address: | ………………………………………………………………………………………………………………… |
| Sort Code: ………………… | Account Number: | ………………………………………………………….. |
| **This Account will not be opened without letterhead / compliment slip** |
| I / We accept and agree to comply with your nett monthly payments terms |
| (unless otherwise agreed in writing) |
| I / We give My/ Our consent to a credit search being made on Me / Us as owner / Partner(s) or Director(s) of |
| this organisation both now and at any future date. I understand this search will be recorded by the agency |
| For limited companies, we the undersigned being a director of the company jointly and severally guarantee performance of all the company’s financial obligations to Buckhurst Plant Hire Limited and are hereby bound by their standard Terms and conditions. |
| Signatures & Position in Organisation: | ………………………………………………………………………………………. |
| Date: | …………………………………………… | Credit Amount Required: | …………………………… |
| **Administration Use Only** |
| **Account No:** |  | **Credit Limit:** |  | **Date:** | **Processed By:** |

 **Returning your Credit Application Form**

Once completed, please return this form as well as a copy of your up to date hired in plant insurance and a copy of your company letterhead to Keilli.Lee@spartanes.co.uk.

If you have any questions, please ring the office.