

## Credit Account Application & Agreement PLEASE COMPLETE IN BLOCK CAPITALS

Unit 55, North Street, Leighton Buzzard, Bedfordshire, LU7 1EQ Tel - 01908 760719

| COMPANY NAME   |   |  |   |   |           |          |
|--|---|--|---|---|-----------|----------|
| COMPANY TYPE (TICK)  | Limited Company   | Sole Trader  | Partnership   |   |           |          |
| COMPANY DIRECTOR/SC  | LE TRADER/PARTNER NAME  |  | PARTNER 2 NAME (IF APP                                    | LICABLE)  |           |          |
| ADDRESS  |   |  | ADDRESS   |   |           |          |
|  |   |  |   |   |           |          |
| POSTCODE   |   |  | POSTCODE  |   |           |          |
| COMPANY ADDRESS  |   |  |   |   |           |          |
|  |   |  | POSTCODE  |   |           |          |
| TEL  |   |  | MOBILE  |   |           |          |
| EMAIL  |   |  | WEBSITE   |   |           |          |
| VAT NO   |   |  | REG NO  |   |           |          |
| PLEASE PROVIDE KEY CO  | NTACTS FOR YOUR SALES & ACCO  | UNTS DEPARTMENTS   |   |   |           |          |
| SALES CONTACT NAME   |   |  | ACCOUNTS CONTACT NAI                                      | ME  |           |          |
| EMAIL  |   |  | EMAIL   |   |           |          |
| TEL NO   |   |  | TEL NO  |   |           |          |
| ANTICIPATED MONTHLY  | SPEND £1,00   | £2,500   | £5,0  | 000   | £10,000   | £10,000+ |
| be in accorance with Un<br>(Business, Organisation<br>any additional cost incu | ue Group Services Limited openin<br>ique Group Services Limited stand<br>or Individual) do guarantee paym<br>rred. I have retained a copy of th | dard terms and conditions<br>nent of all sums due from t | of sales, a copy of which is<br>the company to Unique Gro | s enclosed overleaf. 1 i<br>oup Services Limited to | the Buyer |          |
| SIGNED (IN ACCORDANCE WITH BANK MANDATE)                                       |   |  |   | DATE  |           |          |
| PLEASE LIST TWO TRADII   | NG REFERNECE WHERE YOU HAVE   | BEEN GIVEN CREDIT TERM                                   | 15  | POSITION  |           |          |
| NAME   | VO REFERENCE WHERE TOO HAVE   | BEEN GIVEN CREDIT TERM                                   | NAME  |   |           |          |
| COMPANY NAME   |   |  | COMPANY NAME  |   |           |          |
| ADDRESS  |   |  |   |   |           |          |
| VANUESS  |   |  | ADDRESS   |   |           |          |
| POSTCODE   |   |  | POSTCODE  |   |           |          |
| TEL NO   |   |  | TEL NO  |   |           |          |