

APPLICATION TO OPEN A CREDIT ACCOUNT **Must be completed in FULL**

New Account Application

I/We request credit facilities with your company AD Building & Electrical Service Ltd.

I/We have read the terms and conditions and understand that your credit terms are that payment is due promptly 30 days accordance the date of invoice with your conditions of Sale.

I/We noted these include a retention of title clause.

Business _____

Name _____ Surname _____

Address _____
_____ Post Code _____ Date: ____/____/____

Signed: _____ Position _____

Please print signatories full name

Type of Customer

LTD.LIABILITY/ PARTNERSHIP / SOLE TRADER

How long has applicant been established? _____ Years

How long has applicant been at address? _____ Years

Registered office Address (Companies Only) _____

Registered Company Name: _____

Trading As _____

Registered Company No _____

Trade Refs Name & Address:

(1) Mr, Mrs, Ms _____ First Name _____ Surname _____ Position in Company _____

Private Address: _____

Post code _____ Signature _____

If less than 2 years, previous address _____
_____ Post Code _____

(2) Mr, Mrs, Ms _____ First Name _____ Surname _____ Position in Company _____

Private Address _____

Post code _____ Signature _____

If less than 2 years, Previous address _____
_____ Post Code _____

Please Provide Details of your Bankers:

Name _____ Address _____

Sort Code ___ / ___ / ___ Account No. _____

Have you been refused a credit account or had your credit facilities withdrawn with any other trade supplies?

If Yes to above, give

name(s): _____

I certify that I have checked the particulars on this form completed in my presence, and to the best of my knowledge and belief, they are correct.

Name: _____ Signed: _____ Date ___ / ___ / ___

Invoice Name & Address

Name _____ Address _____

Post Code _____

Delivery Address (if different) _____

Post Code _____

I certify that I have checked the particulars on this form completed in my presence, and to the best of my knowledge and belief, they are correct.

Name: _____ Signed: _____ Date ___ / ___ / ___

Contact for Account Queries

Mr, Mrs, Ms _____ First Name _____ Surname _____ Invoice No _____

Private Address: _____ Post Code _____

Tel No: _____ Fax No: _____ Mobile _____

PLEASE ATTACH A SPECIMEN LETTER HEADING OF APPLICANTS BUSINESS

If partnership, give names and home addresses of all partners:

(Partner 1)

Post Code _____

(Partner 2)

Post Code _____

(Partner 3)

Post Code _____

N.B If this is the customers first venture into business and the customer is a limited liability company, the continuing guarantee **must** be completed in other circumstances.

Continuing Guarantee

To: AD BUILDING & ELECTRICAL

In consideration of AD Building & Electrical agreeing to grant credit to the company applying for credit herein ("the Company") I hereby unconditionally and irrevocably guarantee the due and punctual performance of all the terms and conditions and covenants contained herein on the part of the company and as primary obligor and not merely sure agree to indemnify and keep your indemnified against all action losses proceedings damage and expenses whatever arising as a result of failure by the Company to comply with the terms of this agreement.

Signed: _____