

# Nick Brookes Recycling Limited

## Application for Commercial Credit

[www.nickbrookes.co.uk](http://www.nickbrookes.co.uk)

Phone 01829 260687 Fax 01829 262021

Full trading Name/s of applicant: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E Mail Address: \_\_\_\_\_ Website: WWW. \_\_\_\_\_

Trading address: \_\_\_\_\_

Required Credit Limit: £ \_\_\_\_\_

If different - Address of Registered Office \_\_\_\_\_

Year of incorporation \_\_\_\_\_ Company reg No: \_\_\_\_\_ VAT No: \_\_\_\_\_

Company S.I.C Code: \_\_\_\_\_

If Partnership please give full names (not initials) and private addresses of All Partners:

1.
2.
3.

Bank name and address: \_\_\_\_\_

Names and addresses of 2 principal suppliers:

Contact Name/Number:	Contact Name/Number:
Email:	Email:

Name of managing Director/Senior partner: \_\_\_\_\_

Name of person responsible of payments: \_\_\_\_\_

### Declaration by Applicant (Director or Partner to Sign)

I being an authorised Officer of this business, request you to open a credit account .I agree that payment of all accounts will be received by you (our supplier) within your stated terms of payment of 30 Days month end and appreciate that adherence to this obligation is the essence of the contract between us.

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_