

Company Trading Name:	Company Registration No.									
Address:	Registered Office (If different):									
Postcode:	Postcode:									
Telephone:	Telephone:									
Name Of Principal (M.D.)										
Finance Director / Controller:					Accounts Contact:					
					Accounts Email:					
Nature of Business:										
LEGAL STATUS (Please tick relevant box) <input type="checkbox"/> Limited Company <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Trader <input type="checkbox"/> Charity <input type="checkbox"/> Local Government <input type="checkbox"/> Other If Sole Trader / Partnership, please provide name and address of partners separately No of years in business / trading										
Is the trading company part of a group? Yes / No If yes, please provide name of holding company / group										
Bankers name:					Bank A/C No:			Sort Code:		
Branch Address:					Credit Limit Applied For: £ The credit limit must not exceed the equivalent of 2 months trading					
Tel No:										
PLEASE SUPPLY TWO TRADE REFERENCES:										
1.					2.					
Accounts Tel No:					Accounts Tel No:					
Please provide your VAT number										

CREDIT TERMS: PAYMENT IS DUE NET 30 DAYS MONTH END

We acknowledge receipt of your terms and conditions of the business and give you permission to contact these referees and our banks to provide reference. A Finance Director must sign agreeing to our payment terms.	
Authorised Signature:	Name (Block Capitals)
Position in Company	Date:

For Office Use Only	
Application Approved	YES / NO
Account Number:	Credit Limit Approved: £
Approved By:	Date

Completed form to:
dawn@contourheating.co.uk
Tel: 01952 290498

Contour Heating Products Ltd
The Mansions
43 Broadway
Shifnal
Shropshire TF11 8BB