

TRADE ACCOUNT APPLICATION

CUSTOMER DETAILS			
Company name:			
Address:			
Address:			
Postcode:			
Type of company:	☐ Limited Company	☐ Sole Trader	☐ Partnership
Registration number:			
Registered Office Address (if different from above)			
Telephone:			
Fax:			
Email:			
Purchasing contact:			
Accounts contact:			
TRADE REFERENCES			
Company 1:			
Contact name:			
Address:			
Postcode:			







Telephone:		
Email:		
Company 2:		
Contact name:		
Address:		
Postcode:		
Telephone:		
Email:		
BANK DETAILS		
Bank name:		
Branch:		
Account number:		
Sort code:		
I hereby authorise Fleet Services to obtain references from the above, as and when appropriate. I agree to abide by the Terms and Conditions as set out by Fleet Services which include that all invoices are due to be paid within 30 days from the date of invoice, and that a Purchase Order must be given for services rendered.		
Signed:		
Printed name:		
Position:		
Date:		