DVB HIRE
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NG14 6DG

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Application for credit account

LIMITED COMPANIES - Complete boxes 1. 2. 4 **SOLE TRADERS or PARTNERSHIPS - Complete boxes 1. 3. 4**

[1] – Company Details

Company Registered Name: _____ **Trading Name:**

Trading Address:

Telephone Number: _____ **Email:**

Registered Company Address (if different from above)

Company Reg. No: _____ **V.A.T Reg. No:** _____ **Type Of Business:**

Buyers Contact Name: _____ **Telephone Number:** _____ **Email:**

[2] - Monthly Credit Required: £

Bank Details - Bank Name: _____ **Account Name:**

Bank Address:

Sort Code: _____ **Account Number:** _____ **ALSO SEND US A CURRENT LETTERHEAD**

Accounts Contact Name: _____ **Telephone Number:** _____ **Email:**

All invoices / Statements etc. WILL be sent in electronic format to the billing Email:
contact us if you wish to opt out

Billing Address:

[3] PARTNERSHIPS / SOLE TRADERS ONLY: In addition to box. 1. give home details and 2 references.

Sole Traders or Partner 1 Name: _____ **Telephone Number:**

Home Address:

Partner 2 Name: _____ **Telephone Number:**
(provide additional details if more than 2 partners)

Home Address: _____ **Postcode:**

[4] Trade references

Company: _____ **Tel Number:** _____ **Email:**_____

Company:_____ **Tel Number:** _____ **Email:**_____

DECLARATION AND AUTHORISATION

I/We have read, understood and agree to DVB HIRE terms & conditions.
I/We accept responsibility for any loss or damage to any or all of the Equipment hired by ourselves.
I/We acknowledge and accept that DVB HIRE payment terms of 30 days from invoice date unless otherwise agreed in writing.
I/We will agreed that if credit is granted, I/We will pay in accordance with the above terms and that in processing this Credit Application.
I/We hereby give permission for DVB HIRE to request information regarding our business from our / my bank and any Credit Reference Agencies.

SIGNATURE: MUST BE SIGNED BY DIRECTOR / OWNER (SOLE TRADER / OR PARTNER/S)

Name in Block Capitals: _____ **Position in Company:**

Signature: _____ **Date:**

Please note the following must be attached when returning the form:

- **Insurance policy for hired in plant with a MINIMUM cover level of £50,000**
- **Company letterhead**
- **Identification: Driving licence /or Passport**
- **Proof of address - Utility bill (no older than 3 months) – Address of utility bill MUST correspond with identification**

Machines Hired Under HAE Model Conditions for the Hiring of plant (2025)