



Bracknell
HEATING & PLUMBING
SUPPLIES LTD



APPLICATION TO OPEN CREDIT ACCOUNT

To comply with recent changes in the data protection legislation we must now request that all customers completing one of our application forms to open a credit account must sign in Section 16 overleaf having read the statement below authorising us to contact third parties, in order that we may process your application. Without this form signed and returned with your completed form, we regret we will be unable to proceed further with your application.

In processing your account for credit facilities we may make enquiries of credit reference agencies or other third parties who may record those enquiries. We may also disclose information about the conduct of your account with us to credit reference agencies or other third parties. The information obtained from, or provided to, credit reference agencies or other third parties may be used when assessing further applications for credit terms, for debt collection, for trading and for fraud prevention.

BRACKNELL HEATING AND PLUMBING SUPPLIES LIMITED

Registered/Head Office:

UNIT 8, TRADE CITY, WESTERN ROAD,

BRACKNELL, RG12 1FJ

Company Reg. 10848315. VAT No. 278865044

1 A COPY OF YOUR LETTERHEAD SHOULD ACCOMPANY THIS APPLICATION.

PLEASE INDICATE IF YOU ARE A LIMITED COMPANY

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

PLEASE TICK

2 TRADING NAME
ADDRESS
POSTCODE
TELEPHONE No.
MOBILE No.
FAX No.
EMAIL

3 DATE

4 PRINT CHRISTIAN NAME	PRINT SURNAME
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5 PLEASE STATE YOUR DATE OF BIRTH

6 PLEASE STATE YOUR POSITION IN THE COMPANY

7 REGISTERED OFFICE ADDRESS (Limited Company) or PRIVATE ADDRESS (Unlimited Business)
COMPANY REGISTRATION No. <input type="text"/>

8 TYPE OF BUSINESS:	Public Limited <input type="checkbox"/>	Private Limited <input type="checkbox"/>	Sole Trader <input type="checkbox"/>	Partnership <input type="checkbox"/>	LLP <input type="checkbox"/>
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9 HOME ADDRESS & D.O.B. IF DIFFERENT FROM ABOVE FOR OTHER PARTNERS OR DIRECTORS		
NAME	NAME	NAME
DATE OF BIRTH	DATE OF BIRTH	DATE OF BIRTH
ADDRESS	ADDRESS	ADDRESS

10 HOW LONG ESTABLISHED	11 NATURE OF BUSINESS	12 TYPE OF PREMISES (Home/Shop/etc)
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13 NUMBER OF EMPLOYEES	13 TOTAL CREDIT LIMIT REQUIRED £
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15 PLEASE GIVE DETAILS OF 2 FIRMS SUPPLYING GOODS ON CREDIT WHO MAY BE CONTACTED FOR REFERENCES	
A) Company Name and Address	B) Company Name and Address
TEL:	TEL:

I / We hereby apply for a Trade Credit Account and agree to pay the account by the last working day of each month following month of delivery in accordance with the conditions of sale, and being a Director/Partner or Proprietor of the applicant Company, jointly and severally guarantee performance of all the Company's financial obligations to Bracknell Heating & Plumbing Supplies Ltd, including any financial obligations arising from any increase in credit limit granted by Bracknell Heating & Plumbing Supplies Ltd, from time to time following the review of the applicant company's account. I / We also acknowledge and accept your terms and conditions of sale. I / We understand your payment terms are 30 days net. I / We have read and understood terms and conditions above and the data protection overleaf on this form. Must be signed by a director(s), partner(s) or proprietor(s) of the business.

16 PLEASE SIGN HERE (All director(s), partner(s) or proprietor(s) if applicable) Please read data protection overleaf before signing

SIGNATURE.....	SIGNATURE.....	SIGNATURE.....
PRINT.....	PRINT.....	PRINT.....

TO BE FILLED IN BY BHPS BRANCH			
CUSTOMER CLASSIFICATION	BRANCH CODE	LOW/HIGH RISK	ACCOUNT NUMBER
CUSTOMER TERMS		NOTES	