

Ship-Shape Products Ltd. Credit Account Application Form

Tel 020 8686 2420		Company Details		Fax 020 8681 1026	
Company Name		Holding Name			
Trading Address		Telephone			
		Fax			
		E-mail			
		Website			
		Primary Contact			
PostCode		Other Contact			
Registered Address		Telephone			
		Fax			
		E-mail			
		Primary Contact			
PostCode		Other Contact			
Delivery Address		Telephone			
		Fax			
		E-mail			
		Primary Contact			
PostCode		Other Contact			
Company Reg. No		VAT No.			
Company Type (Ltd.Etc)		Year Formed			
Director Name		Director Name			
Director Name		Director Name			
Trade References					
Trade Reference		Trade Reference			
Address		Address			
PostCode		PostCode			
Telephone		Telephone			
Fax		Fax			
E-Mail		E-Mail			
Bank Details					
Bank Name		Sort Code			
Address		Account No			
PostCode					
Telephone					
Fax					
E-Mail					
Credit & Authorised Purchasers					
Credit Limit Required		Purchaser Name 1			
Request for extra terms					
Standard Credit Terms	14 Days From Date of Invoice	Purchaser Name 2			
Signature of Applicant					
I agree to the Terms & Conditions of Payment and all Other Trading Terms of Ship-Shape Products Ltd.					
Print Name		Date			
Signature		Position			

Please Complete and return Signed Form by Post to our address 15,The Swift Centre 41,Imperial Way Croydon CR0 4RR