

# APPLICATION FOR CREDIT ACCOUNT



Suppliers of Tyre for Coach, Bus & Haulage Companies

59A Court Road, Malvern, Worcester WR14 3BS

Tel: 01684 560029 · Fax: 01684 577734 · Mob: 07841 239411

Email: tdt@tdtyres.com · Web: www.tdtyres.com

Company Registered in England number 04495028 · VAT Registration number 793 7708 75

Limited Company       LLP       Sole Trader  *please tick*

Company Name ..... Company Reg No. ....

Company Address .....

.....

..... Post Code .....

Telephone ..... Mobile .....

Fax ..... Email .....

Registered Office Address (if different from above) .....

..... Post Code .....

Main Contact ..... Tel .....

Main Accounts Contact ..... Tel .....

**Names of Proprietors** - *If non limited company, please give home address and date of birth*

Name ..... DOB .....

Address .....

..... Post Code .....

Name ..... DOB .....

Address .....

..... Post Code .....

Name ..... DOB .....

Address .....

..... Post Code .....

**Bank Details**

Bank ..... Branch .....

Address of Branch .....

..... Post Code .....

Account Name .....

Account No. .... Sort Code .....

**Trade References - please give 2**

Company ..... Contact .....

Address .....

..... Post Code .....

Tel ..... Time trading with company .....

Company ..... Contact .....

Address .....

..... Post Code .....

Tel ..... Time trading with company .....

I hereby Authorise TD (UK) Ltd t/a TD Tyres to obtain references from the above as and when appropriate. I agree to abide by the terms and conditions as set out by TD (UK) Ltd t/a TD Tyres, which include that all invoices are due to be paid, as terms agreed, from the date of invoice and that a purchase order must be given for services rendered.

**I declare I have authority to apply for credit limit of £ on behalf of the company.**

Signed ..... Signed .....

Position ..... Date .....

**PLEASE ENCLOSE A COMPANY LETTERHEAD WITH APPLICATION FORM**

|                      |                      |
|----------------------|----------------------|
| For office use only: |                      |
| Account No.: .....   | A/c opened by: ..... |
| Credit Limit: .....  | Signed: .....        |
| IF? Y/N .....        | Date: .....          |
| Sales Person: .....  |                      |