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NEW ACCOUNT APPLICATION FORM

Trading Name:	
Trading Style: (i.e. partnership, sole trader, Ltd Company, LLP)	
Statement Address:	
Sales Contact: (name and position)	Tel: Email:
Contact for Credit Control:	Tel:
Type of Business:	
Period Established	Up to 6 months 6 - 12 months 1 - 3 years Over 3 years
PERSONAL CREDIT GUARANTEE – to be completed by a director of a limited co/member of LLP In consideration of your agreement to supply goods on credit to the company described above applying for credit herein (the company) I/we the undersigned being director(s)/member(s) of the company/LLP hereby unconditionally and personally, jointly and severally guarantee payment of all monies due and owing by the company to Hancocks Drainage and Building supplies Ltd, its subsidiaries and successors, including all monies due and owing by reason of any increases in the credit limit granted by Hancocks Drainage and Building Supplies Ltd from time to time following review of the Company's credit account and note the additional terms below. Signature: Date: Print name:	

For any Personal Credit Guarantee

- 1) Any credit limit on a credit account being the initial credit limit, which would be subject to increase; and
- 2) If the credit amount is increased, it will be covered by the Personal Guarantee and if the customer uses the increased credit limit, then this is deemed consent by the Personal Guarantor to the increase in credit limit.

NAMES AND HOME ADDRESSES OF DIRECTORS/PARTNERS

Name:
Date of birth:
Address:

Name:
Date of birth:
Address:

Postcode:
Tel No:

Postcode:
Tel No:

TRADE REFERENCES

1- Name:

Address:

Tel:

2 -Name:

Address:

Tel:

BANK DETAILS

Bank Name:
Address:

Sort Code:
Account number:

Tel:

PLEASE READ AND COMPLETE ALL SECTIONS OF THE APPLICATION BEFORE SIGNING THE SECTION BELOW

I/We make this application to open a credit account with Hancocks Drainage and Building supplies Ltd.
I/We understand that credit terms are that payment is due promptly at the end of the month following the date of invoice and that if granted credit, I/We agree to pay in accordance with these terms.

Initial Credit Limit Required:

Signature of applicant:

Date:

Print Name: