Customer Account Application Form

Company Details					
Registered Co. Name:			Company Reg:		
Trading Name:			Incorporation Date:		
Registered Office			VAT Number:		
			Company Type:	Sole Trader: Yes/ No? LTD/PLC: Yes/ No? Partnership: Yes/ No? Government: Yes/ No?	
	Postcode:				
Correspondence Address (If different from above)			Industry Sector		
			Website		
	Postcode:				
Collection Address			Payment Terms	14 Days DD	
			Annual Turnover		
	Postcode:				

Primary/Operations Contact Information			
Name:		Telephone:	
Position in Company:		Mobile:	
E-Mail:		DDI:	

Accounts Payable Contact Information			
Name:		Telephone DDI:	
Position in Company:		Invoice Email	
E-Mail:		Statement Email:	

Directors Information/Business Owner Information			
Name		Title:	
Name		Title:	
Name		Title:	
Name		Title:	

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Account Requirements			
Estimated Weekly Spend:	£	Payment By:	Direct Debit: Yes/ No?
Credit Limit Requested:	£		Electronic Payment: Yes/ No?
Direct Debit is our default payment method, other electronic payments methods can be requested and will be reviewed by the Credit Manager. Any decision on alternative payment methods, is subject to an exemplary credit score/rating and approval of the Credit Manager			

Acceptance of Terms

- Payment terms are strictly 14 days from document date, collection via direct debit.
- Overdue accounts may result in your account being placed on stop.
- Cancellation of a "Direct Debit Instruction" is a deviation from the default payment method and will result in the account being placed on stop.
- Invoice queries should be raised within 7 days from date of invoice.
- All transactions and parcels shipped via The APC will be in accordance with the APC Terms and Conditions of Carriage. To view these please click on the following link APC Terms & Conditions of Carriage
- All account invoices will be subject to a fuel surcharge at the current rate.

I CONFIRM

- That I have read and understood the terms and conditions above and I am authorised to sign and accept the agreed terms.
- That we agree to the payment terms and collection method.

Signature:		Position:	
Print Name:		Date:	

Internal Use Only

Credit Control			
Account Number:		Date Opened:	
Credit Limit Set		Experian Score	
Experian Max Limit:		Terms Set	
Payment Method		Date DDI Sent	