

C. J. O'Shea Plant Hire Ltd.
CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION

Title:			
Company name:			
Phone:	Fax:	E-mail:	
Registered company address:			
Town:	County:	Post Code:	
Date business commenced:		Company Reg No:	
Sole proprietorship:	Partnership:	Limited Company:	Other:
LIMITED / PLC COMPANIES		NON LTD COMPANIES / PARTNERSHIPS / SOLE TRADERS / INDIVIDUALS	
*If the business has not filed the 1 st year of active trading accounts or have filed dormant accounts within the past 12 months, details of up to 2 current directors home addresses and 1 directors photo identification must be provided.		* All Non-Ltd companies, sole traders, partnerships, individuals must provide photo ID (either driving licence or passport) * If you are not known on the Electoral Register then a recent utility bill dated within the last 3 months must be provided as proof of residence.	
Director/Proprietor 1 Name:		Director/Proprietor 2 Name:	
Home Address:		Home Address:	
Post Code:	DOB:	Post Code:	DOB:

BUSINESS AND CREDIT INFORMATION

Invoice address:			
Town:	County:	Post Code:	
Account Department Contact:			
Telephone:	Accounts/Invoicing E-mail:		
BANK DETAILS			
Bank name:			
Bank address:			Phone:
Town:	County:	Post Code:	
Bank Account Number	Sort Code		

BUSINESS/TRADE REFERENCES

Company name:			
Address:			
Phone:	Fax:	E-mail:	
Type of account:			
Company name:			
Address:			
Phone:	Fax:	E-mail:	
Type of account:			

BUSINESS INFORMATION

What type of Premises do you occupy:
Are Premises Owned or Rented:
Number of Employees:
Do you issue Company Order numbers:

AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize C. J. O'Shea Plant Hire Ltd. to make inquiries into the banking and business/trade references that you have supplied.
4. I/We declare that the above information is correct and that I/We have read and agree to your Terms and Conditions of Trading given on separate document
5. I/We authorize you to make enquires in relation to this Account at your discretion and that you may refuse opening a Credit Account without giving a reason and reserve the right to amend, suspend or remove credit facilities at any time, at its absolute discretion without notice.
6. The person signing this form is authorized to enter legally binding contracts on behalf of the applicant.

SIGNATURES

Name:

Authorised Signature:

Title/Position:

Date:

Name:

Authorised Signature:

Title/Position:

Date:

FOR INTERNAL USE

Manager:

Amount Credit Approved:

Account Number:

Date:

Comments:

Signature:

Stock Value Limit:

Account Type: