

Premier Furniture Solutions

Credit Account Application Form

Client Full Name and Trading Style:	
Name of Parent Company or Group	
Company Reg. No	
<i>Proprietors Personal Details (not required if Limited Company)</i>	
<i>(Proprietor / Partner 1) Full Name: Home Address: Number of years at this address:</i>	
<i>(Partner 2) Full Name: Home Address: Number of years at this address:</i>	
<i>(Partner 3) Full Name: Home Address: Number of years at this address:</i>	
Date Business Established	
Company Telephone Number	
Company Fax Number	
Company Trading Address	
Statement Address <i>(if different from above)</i>	
Name and Address of Company's Bankers	

Bank A/C No	
Bank Sort Code	
Required Credit Limit	£
VAT No	
Trade References <i>(Please supply two)</i>	
Company Name:	
Address	
Contact Name:	
Average Monthly Credit Allowed	£
Company Name:	
Address	
Contact Name:	
Average Monthly Credit Allowed	£
<p>I/We hereby confirm that the above information is correct and that I/We undertake to abide by the terms of the Premier Furniture Solutions 30 days credit agreement, and their Terms and Conditions of Business, a copy of which can be obtained upon request. Should the agreement be broken, all money outstanding becomes payable immediately.</p> <p>I also give permission for Premier Furniture Solutions and/or Royal Bank of Scotland Commercial Services to contact the above References and Bankers and obtain any information that they deem necessary to satisfy themselves of my/our ability to meet my/our debts, both existing and forthcoming.</p> <p>Premier Furniture Solutions reserve the right to refuse credit.</p>	
Signature of Owner / Managing Director	
Printed Name	
Date	