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CREDIT ACCOUNT APPLICATION FORM UPDATED Q1 2017

Please complete all sections, attach a company letterhead and sign, as your authority that PPS is permitted to approach your registered office, accountants, referees and bankers to confirm your details.

Upon receipt of satisfactory references, including the bank reference, PPS will indicate the credit limit and trading terms to be entered into between the parties.

COMPANY NAME: COMPANY REGISTRATION NO:

FULL TRADING ADDRESS: VAT NUMBER:

REGISTERED ADDRESS:

APPLICANT NAME: Signature:

Job Title: Date:

Type of Business: State if it is a Limited Company, Partnership, Sole Trader:

How many years in existence:

Applicant Landline Telephone No:

Applicant Mobile Telephone No: (1) Email address:

Accounts contact: (2) Email:

Web site address:

Credit Required: £

FULL NAME AND ADDRESS OF COMPANY BANK ACCOUNT:

ACCOUNT No: SORT CODE No:

TELEPHONE No: FAX. No:

FULL NAME AND ADDRESS OF TWO BUSINESSES WITH WHOM YOU HAVE BEEN TRADING REGULARLY ON A CREDIT ACCOUNT BASIS FOR AT LEAST TWO YEARS:

No.1: Company Named person:

Address:

Telephone Number: Email address:

No.2: Company Named person:

Address:

Telephone No: Email address:

PLEASE RETURN TO: Steve Smith, Sales Director. Email: Steve@professionalplumbingsuppliesltd.com

Please note all business will be conducted under the Professional Plumbing Supplies Ltd Terms and Conditions of Sale available on the web site or by email.