

CREDIT APPLICATION FORM

By signing this agreement you will be confirming that the information given below is true and complete. The company may, before opening an account, take up references or otherwise satisfy itself as to the identity and suitability of an applicant. The company may also at any time refuse to open or continue an account.

TO BE COMPLETED BY THE APPLICANT

BUSINESS DETAILS

Full Name(s) / Company Name
(Please attach letterhead)

Type of business: PLC / Private Limited / Partnership / Sole Proprietor / Other
(Please delete as applicable)

Nature of business

Trading / Invoice Address

Telephone No.

Fax No.

Registered number (if trading as a limited company)

Registered address (if different from above)

Collection address (if different from above)

Company VAT No.

Years in business

Monthly credit required

Contact Bought Ledger

Email

Email for Invoice

Contact Despatch

Email



Expect Distribution Ltd
Premier Point
Premier Gate
Staithegate Lane
Bradford. BD6 1DW

Tel: 01274 378220
Fax: 01274 378230

Email: info@expectdistribution.com
Web: www.expectdistribution.com

Contact Director

Email

TRADE REFERENCES (2 required)

Name

Address
In Full

Tel. No.

DECLARATION

I / WE REQUEST A MONTHLY CREDIT ACCOUNT WITH EXPECT DISTRIBUTION LTD.

I / WE CERTIFY THE ACCURACY OF THE STATEMENTS GIVEN AND AUTHORISE YOU TO MAKE ANY ENQUIRIES WHICH YOU MAY CONSIDER NECESSARY FOR CONFIRMATION OF THESE STATEMENTS AND FOR CREDIT ASSESSMENT.

I / WE ACKNOWLEDGE THAT GOODS ARE MOVED IN ACCORDANCE WITH THE RHA CONDITIONS OF CARRIAGE 2020 A COPY OF WHICH HAS BEEN RECEIVED.

I / WE ACKNOWLEDGE THAT ALL GOODS WAREHOUSED ARE STRICTLY STORED UNDER UKWA TERMS AND CONDITIONS. A COPY OF THIS IS AVAILABLE UPON REQUEST.

I / WE UNDERSTAND THAT PRODUCTS STORED ON EXPECT DISTRIBUTION PREMISES MUST BE INSURED BY OURSELVES, THE CLIENT.

I / WE AGREE TO PAYMENT TERMS OF **30 DAYS FROM DATE OF INVOICE**.

I / WE NOTE THAT STANDARD COVER OF £1300 PER TONNE (£1.30 PER KILO) APPLIES ON ALL CONSIGNMENTS DESPATCHED.

NAME _____ POSITION HELD _____

SIGNED _____ DATE _____

THIS FORM SHOULD BE SIGNED BY:

PLC & LIMITED COMPANY: DIRECTOR / COMPANY SECRETARY / DULY AUTHORISED SIGNATORY
PARTNERSHIP PARTNER SOLE TRADER PROPRIETOR

Please refer to our Privacy Policy on our website for information on how we process the personal data you provide us with on this form (along with personal data collected elsewhere in the course of our business with you).