

# Application for Trade Credit



Please complete and fax back to Graphic Controls Ltd Finance department  
on +44 (0) 1803 863838

Company Name \_\_\_\_\_

Trading Name (if different) \_\_\_\_\_

Finance Department Contact \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Purchasing Department Contact \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Trading Address (Please state if invoices or statements are to be sent to a different address)

\_\_\_\_\_

\_\_\_\_\_

Company Registration Number \_\_\_\_\_ VAT Number/TAX I.D \_\_\_\_\_

## **Bank Reference**

Bank Name and Address \_\_\_\_\_

Bank Account Number \_\_\_\_\_ Contact name \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

## **Trade References**

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Contact Name \_\_\_\_\_ Email \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Contact Name \_\_\_\_\_ Email \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

We confirm that the above information is accurate and hereby authorise Graphic Controls Ltd to contact the above references.

**Authorised Signature**

**Printed Name**

**Position**

**Date**

\_\_\_\_\_

\_\_\_\_\_

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