



JAMES HARE

SINCE 1865

Credit application

PLEASE USE BLOCK CAPITALS

All sections where applicable must be completed. This particularly applies to the private address details of partnerships or sole traders (forms returned without this information will not be processed).

Full trading name _____

Trading address (including post code) _____

Email _____

Tel no. _____

If you wish to receive your invoices by email please state the address to which they are to be sent, if you leave this section blank we will assume the email address above should be used.

If a limited company or public limited company:

Address of registered office _____

Year of incorporation _____ Company reg. no. _____

If partnership or sole trader full name(s) (not initials) and private address(es) and telephone number must be given

A) _____

B) _____

Date of commencement _____ VAT/EORI number _____

For customers outside the UK mainland EORI numbers are imperative, failure to supply this number may result in VAT being payable on delivery.

Bankers _____

Declaration by credit application

We hereby request you to open a credit account. I being an authorised officer of this business do agree that you (our suppliers) will receive payment of all accounts within your stated credit terms.

I/We appreciate that adherence to this obligation is the essence of the contract between us.

Signed _____ Date _____

Name (print) _____