

MYERS

Group

Application for a Credit Account

Data Protection Act 1998

We will make a search with a credit reference agency, which will keep a record of that search and may share that information with other businesses. We may also make enquiries about the principal directors with a credit reference agency. Completion of this form constitutes your consent to the above searches being made.

Identity Proof Checklist

Limited Company:

Company Letterhead

Non Limited Company

Proof of Identity & Address
Recent Utility Bill

Photo Identity
Driving Licence/Passport

Identity Validated

Signed:

Date:

Partnership Details Only (List all Partners)

Partner's Name & Address:

Postcode:

Partner's Name & Address:

Postcode:

Partner's Name & Address:

Postcode:

Partner's Name & Address:

Postcode:

Self Build Validated

Signed:

Date:

MYERS GROUP USE ONLY

Representative's Comments:

Credit Control Comments:

Credit Account Authorised by:

Date:

Credit Limit:

Account Number:

Trading Name:

Is this a Limited Company - Yes or No?

VAT Registration No:

Full Address:

Postcode:

Telephone No:

Fax No:

Email:

Full name of person responsible for payments:

Telephone No inc STD & ext:

Invoice Address (if different from above):

Postcode:

Registered Office Address (only if a Limited Company):

Registered Number:

Issued Share Capital:

Date First Established:

Approximate Annual Turnover:

Number of Employees:

Nature of Business:

Estimated Credit Limit:

Bank Details

Name & Address:

Postcode:

Telephone No:

Fax No:

Account Number:

Sort Code:

Trade Reference 1

Name & Address:

Postcode:

Telephone No:

Fax No:

Trade Reference 2

Name & Address:

Postcode:

Telephone No:

Fax No:

Trade Reference 3

Name & Address:

Postcode:

Telephone No:

Fax No:

If credit facilities are granted I/we undertake to adhere to your Conditions of Sale and to settle my/our account on or before the last day of the month following that in which goods were sold. (See important consent note re. Data Protection Act 1998). Myers Group reserve the right to withdraw credit facilities should the account not be used within the first 3 months.

Signature: Date of Birth:
Print Name: Dated: