



## CREDIT ACCOUNT APPLICATION

**Left Point Distribution: Unit 3, Ocean House, Meridian Centre, Belvoir Way, Fairfield Ind Est, Louth, LN11 0LQ**

**Te:** +44 (0)1507 201 707 **Email:** [sales@left-point-distribution.co.uk](mailto:sales@left-point-distribution.co.uk)

Registered Company No: 5584607 VAT No: 895 1599 64

Please complete and return our credit account application form which will be treated in the strictest confidence:

<b>Company Information</b>	
Trading (shop) name:	Registered company name (if different):
Trading address:	Registered company address (if different):
Postcode:	Postcode:
Email:	Company Registration no:
Telephone number:	VAT no:
<b>Accounts Information</b>	
Accounts contact name:	Accounts telephone number:
Accounts email address:	
Length of time trading (years/months):	
Email:	Company Registration no:
Type of business: Ltd / Sole Trader / Partnership /other (please specify)	
Names and home address of all Directors or Proprietors or Partners:	
Name: Address:	Name: Address:
Name: Address:	Name: Address:
<b>Banking Information</b>	
Bank Name:	Branch:
Bank Address:	
Account Name:	Account Number:
Sort code:	
<b>Continued on next page...</b>	

**Trade References (please supply at least 2 trade references)**

**Trade Reference 1:**

Name :	Telephone no:
Address:	Email Address:

**Trade Reference 2:**

Name:	Telephone no:
Address:	Email Address:

**CREDIT LIMIT REQUIRED: £**

Please also enclose a copy of your headed notepaper when returning this form.  
Failure to correctly complete ALL sections of this form will result in a refusal of your application.

**DECLARATION**

The Applicant(s) confirm that the above information is correct and undertakes to notify Extremehorizon Ltd in writing of any subsequent amendments thereto.  
The Applicant (s) requests that a trade account be opened with Left Point Distribution and agrees to abide by the standard terms and conditions of trading of Left Point Distribution, a copy of which is thereby received and acknowledged.

Signature of applicant: \_\_\_\_\_ Dated: \_\_\_\_\_

For and on behalf of: \_\_\_\_\_

Name (Block Capitals): \_\_\_\_\_ Status: \_\_\_\_\_

(In the case of Partnership or Limited Company, please sign for and on behalf of)