

A copy of your Company Stationary MUST be returned with this form.  
Please Complete All Sections.

Full Company Name .....  
Full Invoice Address .....  
.....  
Telephone Number: ..... Fax Number: .....  
Name of purchasing Contact: ..... Name of Account Contact: .....  
Email Address: ..... Email Address: .....  
Name (s) of Director (s): .....  
Email Address (s) for invoicing: .....  
No of Employees: ..... Date Business Established: .....  
Amount of Credit Requested: ..... Method of Payment: CHAPS / BACS / CC  
\*AMOUNT GIVEN IS DEPENDANT ON INSURANCES\* (PLEASE NOTE WE DO NOT ACCEPT CHEQUES)  
Type of Business: (Limited Company / Partnership / LLP / Sole trader) .....

LIMITED COMPANIES ONLY

Company Reg Number ..... VAT Number .....  
Parent Company: (If Applicable) .....  
Registered Address: (If different from above) .....  
.....

SOLE TRADER / PARTNERSHIP ONLY

Name (s) & Address (s) of proprietor / all partners: .....  
.....  
.....

BANK DETAILS

Name of Bank: .....  
Address: .....  
Account Number: ..... Sort Code: .....

Please Supply Contact Details Of 2 Trade References: (Name, Address & Contact Details)  
1)..... 2) .....  
.....  
.....

For office use only

Account Number ..... Date Account opened: .....  
Credit Limit: ..... Authorised Signature: .....

We confirm that the above information is true and correct. We authorise Ash & Lacy Solutions Ltd to investigate our credit history, including contacting the above bank and obtaining credit reports. We have read Ash & Lacy Solutions Ltd terms and conditions of sale and accept that they will apply to all orders placed by ourselves.

Authorised Signature: ..... Print Name: .....  
Title: ..... Date: .....