WIRS (Wolverhampton) Limited CHURCH LANE, WOLVERHAMPTON,

WEST MIDLANDS, WV2 4AL.

TEL: 01902 712525. FAX: 01902 429016.

E-MAIL: sales@wirs.co.uk WEBSITE: www.wirs.co.uk

APPLICATION FOR CREDIT ACCOUNT

(PLEASE RETURN WITH COMPANY LETTER HEAD)

COMPANY:	REGISTRATION	REGISTRATION NO:	
INVOICE ADDRESS:	TEL NO:	TEL NO:	
POSTCODE:	FAX NO:	FAX NO:	
CONTACT NAME:	.,,,,,,,	TAXNO.	
WEBSITE:	E-MAIL:		
REGISTERED OFFICE ADDRESS IF DIFFERENT	VAT No.	VAT No.	
REFERENCES:	_		
1.	2.		
TEL No	TEL No.:	TEL No.:	
FAX No.:	FAX No.:	FAX No.:	
BANK ADDRESS:	SORT CO	ODE:	
	ACCOUN	NT No.:	
WE REQUEST A CREDIT ACCOUNT UP TO THE VALUE OF: £			
INVOICE WILL BE SETTLED IN 30 DAYS BY:	. CHEQUE B). BANK	(TRANSFER	
NOTE: STANDARD PAYMENT TERMS ARE 30 DAYS UNLESS OTHERWISE AGREED AND CONFIRMED IN WRITING BY WIRS (WOLVERHAMPTON) LTD.,			
WE REQUIRE ALL INVOICES TO SHOW ORDER NUMBERS YES / NO DELETE AS WE ALLOW VERBAL ORDERS TO BE PLACED WITH YOU YES / NO APPROPRIATE			
TO BE SIGNED BY A DIRECTOR OF THE COMPANY: I HAVE READ AND AGREE WITH THE CONDITIONS OF TRADING AS PROVIDED WITH THIS CREDIT APPLICATION FORM.			
BEFORE SIGNING, PLEASE NOTE ONE OUR PARTICULAR TRADING CONDITIONS: RETENTION OF TITLE: THE GOODS OR SERVICES SUPPLIED BY US TO YOU OR YOUR COMPANY REMAIN OUR PROPERTY UNTIL FULLY PAID FOR.			
SIGNED	POSITION	1	

PRINTED	DATED