

Account Application Form

To be completed by any prospective customer wishing to trade on Credit with the above Subscriber. Please note that completing this form does not guarantee you a Credit Account. The Supplier reserves the right to accept or decline any Application without giving any explanation. By completing and signing this Form you give the Supplier the right to follow up on the references provided and to consult any Credit Reference Agency if appropriate. It is the Applicant's responsibility to read and understand the Supplier's Terms of Trade. These Terms will govern all transactions between the Supplier and any approved Credit Account.

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Schools, colleges, public sector organisations and limited companies can apply for a free 30-Day credit account. Simply contact us with your details and we will supply you with our credit account application form.

Company Name:	
Address:	
Post Code:	*Company Registration No:
Tel:.....	Email:.....

Contact in Accounts Department:.....

Email Address: Telephone No:.....

*Registered Office Address (If any different from above):
*Names of proprietors <u>(If non-Limited Company – Please include Date of birth & Home address)</u>

TRADE REFERENCES

Company:	Contact Name:
Address:	
Post Code:	Telephone No:
Company:	Contact Name:
Address:	
Post Code:	Telephone No:

I hereby Authorise [NAME OF COMPANY] to obtain references from the as and when appropriate. I agreed to abide by the terms and conditions as set out by [NAME OF COMPANY], Which include that all invoices are due to be paid with 30days from the date of invoice and that a purchase order must be given for services rendered.

I declare I have authority to apply for credit limit of £ on behalf of the company.

Signed.....Printed Name.....
Position.....Date.....

Please complete in full and scan and send to **accounts@moneysavingprint**