

## **CREDIT ACCOUNT APPLICATION FORM**

BUSINESS DETAILS	
Company Name:	
Company type: (e.g LTD Company, Sole	Trader):
Company Registration Number:	
	Postcode:
	Fax Number:
Email Address:	
Accounts Email Address (if different):	
Years In Business: Year	s At This Address:
Credit Amount Requested: £	
PROPRIETORS/DIRECTORS	
Name:	
Name:	
Home Address:	
TRADE REFERENCES AT WHICH YOU HOL	LD A 30 DAY CREDIT ACCOUNT (4 Must be supplied)
Co Name 1:	Fax/Email:
Co Name 2:	Fax/Email:
Co Name 3:	Fax/Email:
Co Name 4:	Fax/Email:
	oplication you provide us with consent to perform a credit and reference check. d conditions. For further information on our terms and conditions please visit ind-conditions/
Signed:	Print Name:
Position:	Date:

Please sign and post application to Hill Interiors, Hill House, Oak Tree, Burneston, Bedale, North Yorkshire, DL8 2JW