



### **Credit Account Application**

Thank you for applying to Stiven Ltd for a Credit Account. To enable us to open your account please supply us with the following information.

Applicant's name and address: -

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Telephone No. \_\_\_\_\_

**\*\* Telephone Number is Mandatory \*\***

E-mail address \_\_\_\_\_

**\*\* Email Address is Mandatory \*\* (we will email invoices to this address)**

If name in which account is to be opened differs from the Applicant, please specify:-

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Invoicing address if different from above:-

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Please specify whether the account holder is a Sole Trader, Partnership or Limited Liability Company:-

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Name of bank \_\_\_\_\_

Address of bank \_\_\_\_\_

Account No. \_\_\_\_\_ Sort Code \_\_\_\_\_

Name and Address of two trade references:-

(1) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone No. \_\_\_\_\_ Contact Name \_\_\_\_\_

Contact email \_\_\_\_\_

(2) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone No. \_\_\_\_\_ Contact Name \_\_\_\_\_

Contact email \_\_\_\_\_

Estimated monthly credit required:- \_\_\_\_\_

I / we will undertake to meet the credit terms, which are 30 days from the date of invoice. Interest of 8% will be charged on credit extended beyond these terms.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_