



200 Station Road
 Whittlesey
 Peterborough
 Cambridgeshire PE7 2HA
 T: 01733 233884
 F: 01733 233885
 sales@manorpackaging.co.uk
 www.manorpackaging.co.uk

CREDIT ACCOUNT APPLICATION FORM

Please complete and return with a company letterhead. Please note that completing this form does not guarantee you a credit account. By completing and signing this form you give us the right to follow up on the references provided and to consult any credit reference agency. It is the applicant's responsibility to read and understand our terms of trade. These terms will govern all transactions.

Applicant Company/Business				
Address (Principal place of Business)				
				Post code:
Telephone:			Fax:	
Type of Company or Business (Tick)	Sole Trader*	Co Limited by Guarantee	PLC	Limited
	Partnership	Wholly owned Subsidiary**	Holding Company	Other
Contact Name:			Title:	
Managing Director or Proprietor*				

* Please provide full name(s) and home address(es) of all partners in a business or of the sole trader on page 2.

** Please provide the name & registered office of the ultimate holding company on page 3.

Bankers:			
Address:			
Sort Code:			Account No:

Limited Companies only:

Registered Office:	
Company Registration No:	

Trade references:

Name:		
Address:		
Contact:		
Telephone:		Fax:

Name:		
Address:		
Contact:		
Telephone:		Fax:

Partnerships & Sole Traders must provide home addresses of all principals in the firm, because they are jointly and severally liable for any indebtedness incurred by the firm.

Name:		
Address:		
		Post code:

Name:		
Address:		
		Post code:

Name:		
Address:		
		Post code:

Name:		
Address:		
		Post code:

Continue on separate sheet if necessary.

Limited Company applicants that are subsidiaries or associates, please provide the name and company registration number of associated and ultimate holding companies.

Name:		Company No:
Name:		Company No:
Name:		Company No:
Name:		Company No:

Continue on a separate sheet if necessary.

Please give the name and contact details for accounts payable:

Name:		
Address:		
		Post code:
Telephone:	Fax:	
E-mail:		

We agree to accept your terms of account, and confirm that we will pay all outstanding Invoices within 30 days. We understand that Manor Packaging Limited will retain the title of all goods supplied by Manor Packaging Limited, until all monies due to Manor Packaging Limited have been fully paid and cleared. Please note that all first orders will be dealt with on a Pro Forma Invoice basis.

Signed _____ Dated: ____/____/____

Name _____ Position: _____