



CurrentCare Ltd

Marlborough Works, Marlborough Road, Accrington, Lancashire, BB5 5BE
Telephone: +44 (0) 1254 300 730 Facsimile: +44 (0) 1254 237 432
e-mail: sales@currentcare.co.uk

UK - Credit Application Form

Full Trading Name:

Address:

..... Post Code:

Type Of Business: Private Brand Parts Distributor Branded Parts Distributor
Vehicle Manufacturer Other.....

VAT No:

Telephone No: Fax No:

E-Mail Contact: Website:

Accounts Contact Name:

Statement address if different from above:

..... Post Code:

CurrentCare Sales Contact (rep / agents name).....

Bank Details:

Bank Name:

Account No: Sort Code:

Bank Address:.....

..... Post Code:

REFERENCES:

Please give the name and address of two trade references to which we can apply.

Name:

Name:

Address:

Address:

.....

.....

.....

.....

.....

.....

Tel: Fax:

Tel: Fax:

e-mail:

e-mail:

THIS SECTION IS FOR LIMITED COMPANIES ONLY.**NAME:****Registered Address:****Company Registration No:****MONTHLY CREDIT LIMIT REQUIRED:** Please circle the amount required**£500****£1000****£5,000****£10,000**

If more than £10,000, please state the amount required: £.....

DECLARATION:

1. We have read and agree to the terms and conditions of CurrentCare Ltd as attached .
2. Payments will be received by CCL No later than 28 days following the end of the month of invoice.
3. We understand that the goods supplied to us have a reservation of title, and remain the property of CurrentCare Ltd until they are paid for in full, and that CurrentCare Ltd has the right to remove the goods from our premises if not paid for within their trading terms.

Authorised Signatory: (Please print full name).....**Signature:** **Date:****Position Held Within The Company:****Please return the completed form to: -****By Post:** CurrentCare Ltd, Marlborough Works, Marlborough Road, Accrington, Lancashire, BB5 5BE**By E-Mail:** accounts@currentcare.co.uk**By Fax:** +44 (0) 1254 237 432**FOR CCL USE ONLY**

Approved By:	
Authorising Signature:	
Date Account Opened/Approved:	
Approved Credit Limit:	
Terms Agreed:	
Area Code:	
Account Number:	
Account Details Entered By:	