

Swiftpak House | Arrowhead Road Theale | Reading | RG7 4AH

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ACCOUNT APPLICATION FORM

Please complete each section of this form using BLOCK CAPITALS

1. COMPANY DETAILS

Full Company Name	
Principle Trading Address	
	Postcode:
Telephone No.	Fax No.
Registered Office Address	
VAT No.	Registered No.
Name of Proprietor	
Address of Proprietor	
Name of Buyer	Telephone No.
Email Address	Fax No.
Bought Ledger Contact	Telephone No.
Email Address	Fax No.
Credit Limit Requested	

BANK DETAILS 2. Bank Name **Bank Address** Postcode: Sort Code Account No. 3. TRADE REFERENCES (optional, we will contact you if required) Company Name Address Postcode: Fax No. Telephone No. Email Company Name Address Postcode: Telephone No. Fax No. **Email** 4. **TERMS & CONDITIONS** Declaration by Applicant: To be signed by an authorised officer of the Company. I being an authorised officer of this Company, hereby apply for a credit account with Swiftpak Ltd. I agree that payment of all sums due to Swiftpak Ltd will be made within the stated credit terms, and the title of goods supplied to this Company by Swiftpak Ltd shall remain with Swiftpak Ltd until payment by this Company of the total purchase price and of all other sums due to Swiftpak Ltd from this Company. I have read and agreed to the standard Conditions of Trade laid down by Swiftpak Ltd dated August 2011 and printed on page 3. I/We accept the above Terms & Conditions Signed:______ Date: _____ Name [please print]

Title: