

## **New Customer Application Form**

Company Nar	ne				
VAT Number					
Company No.					
Invoice Address		Delivery A	Delivery Address (if different)		
Address 1					
Address 2					
Address 3					
Town / City Postcode					
Tel No.					
Mob No.					
Fax No.					
Contact Name					
Email Address					
Email / Idar 000					
Preferred method of communication?		E-mail	Post		
How long have you been trading under this name?					
What is the nat	ture of your business?				
Do you require a credit account from us or will you be paying upfront?					
What items wo	ould you be requiring on a monthly b	pasis?			
Amount of cred	•				
Please note, if you require a credit account with us then we will need to take up trade references ahead of authorising this. The amount of credit required should reflect the cost of the items you're looking to hire from us on a monthly basis. To allow us to perform these checks ahead of releasing credit, please allow 2 weeks from the time of us receiving the application form, to getting this set up. Therefore, the first invoice is required to be paid upfront until these checks can be completed.					
Bank Details					
Bank Name					
Address					
Town / City					
Postcode					
Sort Code					
Account No.					

Trade Reference	es (only to be filled out if a cro	edit account is required)			
Company	Company				
Address	Address				
Town / City	Town / City				
Postcode	Postcode				
Tel No	Tel No				
Email	Email				
Purchasing Co		Accounts Contact			
Name	Name				
Tel No	Tel No				
email	email				
Please sign to confirm that you accept our Terms and Conditions of Trade, including payment in full within 30 days and that all goods supplied to you remain the property					
	nercial Supplies Ltd until paid				
or Ord Industrial & Collin	lercial Supplies Ltd diffil paid	i ioi iii iuii.			
Please also include a cor	by of your hired in plant insur	ance with this form			
i lease also iliciade a cop	y or your filled in plant mount	ance with this form.			
Authorisation					
Signed		Date			
Position in Company					
Print Name (Block Letters)					
Hired in Plant Insurance					
included					
Once completed please return by either:					
Post to: Unit 1, Greenhill Business Park, Tore, Muir of Ord, IV6 7AG					

Email Scan to: accounts@ordgroup.com