



JAMES HARE

APPLICATION FOR COMMERCIAL CREDIT

PLEASE USE BLOCK CAPITALS

All sections where applicable must be completed. This particularly applies to the private address details of partnerships or sole traders (forms returned without this information will not be processed)

Full Trading Name:

Trading Address:(Including Post Code)

Email

Telephone Number:

Fax Number:

If you wish to receive your invoices by Email please state the address to which they are to be sent, if you leave this section blank we will assume the email address above should be used.

If Limited Company or Public Limited Company:

Address Of Registered Office:

Year of Incorporation:

Co. Reg. No:

If partnership or sole trader full name(s) (not initials) and private address(es) and telephone number must be given.

A)

B)

Date of commencement:

VAT Reg number:

What size is your business? Number of employees:

BANKERS:

Declaration by credit application

We hereby request you to open a credit account. I being an authorised Officer of this business do agree that you (our suppliers) will receive payment of all accounts within your stated credit terms.

I/We appreciate that adherence to this obligation is the essence of the contract between us.

Signed:

Name (print):

Date:

James Hare Limited
PO Box 72 Monarch House Queen Street Leeds LS1 1LX
Telephone +(0)113 2431204 Facsimile +(0)113 2347648
sales@james-hare.com www.james-hare.com

Registered in England No. 73195