

CREDIT ACCOUNT APPLICATION FORM

<p>1</p> <p>Company Name: Full Trading Address:</p>	<p>2</p> <p>Telephone No: Fax No: Email Address:</p>
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3

If Limited Company or Public Limited Company: Yes No

Address of Registered Office:

**Please attach
a copy of
your letterhead**

Year of Incorporation: _____ Registered Number: _____

4

If a Limited Company and a credit limit in excess of £1000 is requested, then company directors are required to give personal guarantees in the event of the company ceasing to trade for any reason. All directors are required to fill in this section to accept their personal guarantee for any monies owed by the company.

Director Name	Home Address	Signature
_____	_____	_____
_____	_____	_____
_____	_____	_____

5

If Partnership or sole trader give full names and home addresses of all partners if different from trading address

Year of commencement of trading

1 _____	
2 _____	
3 _____	

6

Please indicate your anticipated average monthly expenditure with Ultimat:

£ _____

7

Please state maximum credit required:

£ _____

8

Address to which invoices and statements are to be sent (if different from previous):

9 Name and title of person to whom invoices and statements are to be sent:

10 Name and title of person to contact in case of account query:

11 Do you have a specific purchase order procedure for placing orders with suppliers? Yes No

12 If yes, give details of this procedure:

REFERENCES

13 Name, address and telephone number of your bank: Bank account number:
Sort code:

14 Name, address and telephone number of two principal suppliers:

ULTIMAT TERMS

15 Our standard terms for account facilities are payment within 30 days of goods being received by the customer. Ultimat Ltd reserves the right to add an additional surcharge to all accounts not paid within 30 days. This surcharge is levied as per the Late Payment of Commercial Debt Act 1998 as amended. Ultimat Ltd reserves the right to withdraw these facilities. In this event the entire value of outstanding accounts plus any credit charges becomes due for immediate payment. All orders are subject to our standard terms and conditions, a copy of which is available on request.

DECLARATION BY CREDIT APPLICANT

16 I understand and accept the payment and general terms and conditions of Ultimat Ltd (as detailed in section 15 above) and am administratively able to handle the same.

Signed: _____

Date: _____

Name: _____

Title: _____

Please return this completed application form to:

Ultimat Limited, Emmbrook Court, Molly Millars Close, Wokingham, Berkshire RG41 2RX