



Cherry Holt Road, Bourne, Lincolnshire, PE10 9LA
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Registered Waste Carrier No: CB/JM3807ZG
Waste Permit No: 71005

APPLICATION FOR A MONTHLY CREDIT ACCOUNT

Name:		Position within Company:	
Trading Name:			
Registered Name (if different from above):			
Date Established:			
Principle Trading Address:			
Post Code:			
Telephone Number:		Mobile Number:	
Fax Number:			
E-Mail Address:			
What is the nature of your business?			
VAT Number:			
Company Registration Number:			
Managing Director:			
Contact Name for Accounts:		Telephone Number:	
Trade Reference 1:		Trade Reference 2:	
Name of Bank:			
Bank Address (incl Postcode):			
Account Number:			
Sort Code:			
How long has this Account been open?			

Our Terms of Payment for Account Holders are:

STRICTLY 30 DAYS FROM DATE OF INVOICE

I CONFIRM THAT THE ACCOUNT WILL BE PAID TO THE ABOVE TERMS ON A MONTHLY BASIS.

I CONFIRM THAT THE INFORMATION GIVEN ABOVE IS CORRECT.

AUTHORISED SIGNATORY:

DATE OF SIGNING: