Custom Covers (19	984) Ltd		Page 1 of 1	
Quality System Form	No. CC CA	\F1	Rev 1	
CREDIT APPLICATION FORM				

To assist us in opening a Credit Account for your Company Could you please let us have the following information :-

Full Name and Address	7
	_
	_
	_
Phone Fax No.	
Trading Title (if different from Name)	
Is this a Limited Company ? Yes / No Company No.	
Proprietor's Name (if not a Limited Company)	
Your Accounts Contact:-	
Estimated Monthly Turnover with Custom Covers	
Bank Details	Account No
	Sort Code
1st Trade reference	Phone No
	_
	_
2nd Trade reference	Phone No
	_
	_
Please enclose a sample of your letterhead.	
Thank you for this information.	

*I/We request Credit Account facilities, and authorise Custom Covers (1984) Ltd to obtain from, or share with, our referees and any other appropriate source, Credit Status information, in order to process or extend this application for Credit.* 

Signed.....

Date.....