

APPLICATION FOR A CREDIT ACCOUNT

Trading Name: _____

Invoice Address: _____

Post Code: _____

Phone no: _____ Fax: _____ Mobile: _____

VAT Reg. no: _____ Contact: _____

This section is for limited liability companies.

Company Name: _____

Registered Office: _____

Company Registered No: _____

This section for sole proprietors or partnerships.

Owners/Partners names and home addresses:

1. _____

2. _____

Two Trade References

1. Name: _____ 2. Name: _____

Phone: _____ Phone: _____

Fax: _____ Fax: _____

Office Use Only _____ Office Use Only _____

Amount of Credit Required: £ _____

Persons Authorised to Sign for Equipment

Names:

Specimen Signatures:

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

I AM FAMILIAR WITH, AND HEREBY ACCEPT, WIRRAL HIRE'S TERMS AND CONDITIONS OF TRADING IN THEIR ENTIRETY AND WITHOUT RESERVATION, AND THAT WIRRAL HIRE'S TERMS AND CONDITIONS TAKE PRECEDENCE OVER OUR OWN, UNLESS AGREED OTHERWISE IN WRITING.

Signed: _____ Position in firm: _____

Please fax back completed application form, along with a sample letterhead and official order, to 0151 644 8314.

For Office Use Only