

APEX STAINLESS FASTENERS LIMITED APPLICATION FOR CREDIT ACCOUNT

The following information is required in order to obtain a credit account, please complete the form and fax the application to +44 (0) 1788 560164 or email t.ledington@apexstainless.com

Customer Name:	Tel No:	Fax No:
Customer Address:		
Email:	Website:	
Name(s) & Home Address/es of Sole Trader/Partners		
Registered Number:	Date of Incorporation:	
Type of Business:		

Public Limited Company	<input type="checkbox"/>	Partnership	<input type="checkbox"/>
Private Limited Company	<input type="checkbox"/>	Sole Trader	<input type="checkbox"/>
Subsidiary of:			

Size of your Company:	NO. OF EMPLOYEES	ANNUAL SALES
	1 - 4	Under £100,000
	5 - 15	£100,000 - £500,000
	16 - 49	£500,000 - £2m
	50 - 99	£2m - £5m
	Over 100	Over £5m

Name of person responsible for paying your account	
Name and title of the head of your financial function	
Name of your Managing Director	
Name of your Buyer/Sales Contact	
Approximate credit limit required (if known)	[£/€/€]
Please supply your full Company VAT No.	
Where did you first hear of Apex Stainless Fasteners Ltd? <small>(For marketing purposes)</small>	

REFERENCES

Please supply the name and address of 2 principal suppliers and your Bankers:

REFERENCE 1	REFERENCE 2	BANKERS
Tel No: Fax No:	Tel No: Fax No:	

We hereby request credit facilities for this Company. We have seen, and agree to abide by the 'Conditions of Sale' of Apex Stainless Fasteners Ltd.

SIGNED:	POSITION:	DATE:
PRINT:	Ref. ARWEB1013	

(Note: This request must be completed in full and signed by an authorized signatory before an account can be opened).

Completed by Apex: <small>A5/091100(QCD27)</small>	Credit Limit: Account Inputted By:	Authorized By: Checked By:
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