

APPLICATION FOR CREDIT ACCOUNT

COMPANY NAME

ADDRESS:

.....

.....

.....

TELEPHONE NO.

COMPANY REG NO

DIRECTORS/
PARTNERS

.....

.....

COMPANY SEC.

NAME OF PERSON
RESPONSIBLE FOR
ACCOUNT PAYMENT Tel:

PARENT COMPANY
(IF APPLICABLE)

AMOUNT OF CREDIT REQUIRED £.....

TRADE REFERENCES:

1. Name:

Address:

.....

Contact Name: Fax:

2. Name:

Address:

.....

Contact Name: Fax:

BANKERS:
.....
.....
.....
.....

We may consult a credit-referencing agency, which may then record our search on your credit record.

Please sign the consent form below to enable us to complete this search.
Failure to authorise such a search may result in inadequate credit assessment and the refusal of a credit account. A successful credit assessment will result in supplies in accordance with Nimlok Limited's standard terms and conditions.

Consent Form

I..... (Name in Block Capitals)

..... (Position held in Company) consent to Go Promote Limited consulting a credit –referencing agency(ies) to establish our creditworthiness / limit.

I agree to the Standard Terms and Conditions of Business that have been provided to me and accept that our first order and any Hire or Installation projects that we instruct Go Promote Limited to perform will be on a strict pro forma basis.

Signature..... Date.....