

Credit Application

| Business Contact Information | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------------------------|-------------------|
| Company Name: | | | |
| Phone: | | Fax: | |
| Contact Name: | | Email: | |
| Registered Company Address: | | | |
| | | | |
| Town: | | | |
| County: | | Post Code: | |
| Vat Number: | | Company Reg No : | |
| Sole proprietorship: | Partnership: | Corporation: | Other: |
| Business and Credit Information | | | |
| Primary Business Address: | | | |
| | | | |
| Town: | | | |
| County: | | Post Code: | |
| Accounts Contact: | | | |
| Phone: | | Fax: | |
| E-mail: | | Credit Amount Applying For: £ | |
| Bank Name: | | Phone: | |
| Bank Address: | | | |
| | | | |
| Town: | | County: | Post Code: |
| Account Number: | | Sort Code: | |
| Business/Trade References | | | |
| Company Name: | | | |
| Address: | | | |
| | | | |
| Town: | | County: | Post Code: |
| Phone: | Contact: | | E-mail: |
| All references provided will be contacted, therefore please only provide references who will allow our Accounts department direct contact. REFERENCES FROM MAINLINE DISTRIBUTION WILL NOT BE ACCEPTED | | | |
| Company Name: | | | |
| Address: | | | |
| | | | |
| Town: | | County: | Post Code: |
| Phone: | Contact: | | E-mail: |
| Agreement | | | |
| 1. All invoices are to be paid 30 days from the date of the invoice. 2. By submitting this application, you authorize Global Computer Spares Ltd. to make inquiries into the banking and business/trade references that you have supplied. 3. By signing this form you agree to our terms and conditions as per our website proliantserverstore.co.uk | | | |
| Signatures | | | |
| Name: | | Title: | |
| | | | |
| Signature: | | Date:/...../..... | |

Please fax all completed credit application forms to 01892 665065 or email to enquiries@proliantserverstore.co.uk