

ACCOUNT APPLICATION FORM

ENTITY DETAILS:

APPLICANT'S FULL LEGAL NAME (i.e. not trading name):("the Customer")

(Please tick) Sole Trader Individual Partnership Ltd Company Other (please state):

Trading as:

Physical Address:

Postal Address:

Nature of Business: Monthly Credit Amount: \$.....

Telephone: Fax: Email:

Contact Name & Position: Telephone:

OWNERSHIP please insert Owner(s) / Directors Name(s) in full

1:..... Address: DOB.....

1:..... Address: DOB.....

IF LIMITED LIABILITY COMPANY - Address of Registered Office:

Date of Incorporation: Incorporation No:

FINANCIAL & PROFESSIONAL ADVISORS

Shareholders Funds: Paid Up:

Name of Accountant: Solicitor:

Bank: Branch: Acct No:

TRADE REFERENCES			
Company	Contact Name	Phone Number	Account open since

General description of Products/Services to be provided:

I/We have read and agree to be bound by the terms and conditions of trade as printed overleaf or attached. I/We warrant to All Euro Parts Limited that the above information is to the best of my/our knowledge, information and belief true and correct and that I/we am/are duly authorised to enter into this application and future contracts on behalf of the Customer. I/we also acknowledge that pursuant to the personal guarantee contained in the terms and conditions of trade that, where relevant, I/we am/are also signing this application form in my/our personal capacity.

If the applicant is a limited liability company then this application must be signed by a Director.

Signed Print Name Designation

Dated this day of 20.....

Signature of Witness: Name of Witness: Address & Occupation:

OFFICE USE ONLY: CREDIT CHECK (Stamp) Date: COMMENTS