



ANGLIAN CHEMICALS

Millers Close, Fakenham, Norfolk NR21 8NW United Kingdom

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**CREDIT ACCOUNT APPLICATION FORM FOR COMPANY'S TO OPEN AN ACCOUNT
(PLEASE COMPLETE IN BLOCK LETTERS) PLEASE ENSURE ALL FIELDS ARE COMPLETED.
PRIVATE & CONFIDENTIAL**

Company Name in Full _____
 Company Address _____
 _____ Post Code _____
 Owners name & Residential Address _____
 _____ Post Code _____
 Unclassified Company Registration No. _____ VAT No. _____
 Type of Business _____

Contact Name (Sales) _____ Telephone No _____
 _____ Fax No _____
 Email Address _____
 Contact Name (Accounts) _____ Telephone No _____
 _____ Fax No _____
 Email Address _____

The References Given Below Are Companies Who We Purchase Goods From:

Reference
 Company Name _____ Telephone No _____
 Company Address _____ Fax No _____

 _____ Post Code _____

Reference
 Company Name _____ Telephone No _____
 Company Address _____ Fax No _____

 _____ Post Code _____

Reference
 Company Name _____ Telephone No _____
 Company Address _____ Fax No _____

 _____ Post Code _____

Preferred Method of Payment: VISA BACS C.O.D Cheque

We agree your terms of settlement, which are 30 days nett from date of official invoice. Failure of this will result in owner being liable to cover outstanding debts. Please ensure a copy of Company letterhead or Utility Bill is provided.

Signature _____ Position In Company _____

Date _____

Form No: 55/1/99

OFFICE USE ONLY:

ASM	Account Opened By (ASM): Call Frequency: _____	Call Date: _____
Accounts	Account Number: _____ Accounts Dept Signature: _____	ASM Code: _____
S. Admin	Call Schedule Actioned By Sales Department: _____	