

CUSTOMER CREDIT ACCOUNT APPLICATION FORM

Please supply the following information, sign and return to admin@greenstat.co.uk

| Company Na | ame/Tradin | g Name: L | | | | | |
|--|--|--|---|---|---|--------------------------------|--|
| Invoice Address | | | Delivery Address (where different): | | | | |
| Purchase Contact | | | | Payment (Finance) Contact | | | |
| Name | | | 1 | Name | | | |
| Tel No | | | | Tel No | | | |
| Email | | | E | Email | | | |
| Company D | etails | | • | | | | |
| VAT No | | | | Company Reg. No. | | | |
| Number of en | nployees (p | lease tick one of the | follow | ving): | | <u> </u> | |
| □ 1 to 10 | | □ 11 to 50 | | □ 51 to 100 | | □ 101+ | |
| these terms by charged on over include details of admin@greenst | signing below rdue accounts of your custom at.co.uk. All of | w. 30 day payment fact and/or accounts put or ler account number or in | ility from a stop. F anvoice r arty of G | n date of invoice. Pena Preferred payment me number(s), or send a re reen Stationery until p | alties of 2 thod is by emittance ayment is | s made in full. We reserve the | |
| Signature: | | | | Position: | | | |
| Name: | | | | Date: | | | |
| Tel No: | | | | Fmail· | | | |