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CREDIT APPLICATION FORM

Business Name	
Business Address	
Telephone Number	
Fax Number	
Website address	
Sales Contact Details <i>(please include name, phone and e-mail):</i>	
Purpose of PPE/Workwear purchase	Re-Seller / End User (Please delete)
Number of Employees	
What do you anticipate your monthly PPE/Workwear Spend to be	
Number of Years trading	

Invoice Address (if different)	
Accounts Contact Details <i>(please include name, phone and e-mail)</i>	
Company Registration Number	
Company VAT Number	
Bank Name	
Bank Address	
Sort Code	
Account Number	

Please provide full contact details for two Trade References

1)	2)

PLEASE ATTACH A COPY OF YOUR LETTER HEAD