



## Tim Lawson Electrical Contractors

### Trade Credit Application

**Please return this application to:**

Tim Lawson Electrical Contractors  
Accounts Department,  
202 Louth Road,  
Holton Le Clay,  
Lincolnshire. DN36 5AF

Or Accounts@timlawsonelectrical.co.uk

		Company/Trading Name (in full) of Customer:	
		Nature of Business:	
		Type of Legal Entity:	
Telephone Number:		Established (No of years):	
Email Address:		Company Registration No:	
Contact Name:		VAT Registration No:	

Invoice Address:		Registered/Principal Office Address:	
Post Code		Post Code	
Invoice E-Mail address:			
Business accounts available		Years available: (State years e.g. 2016/7)	
Yes/No			
Bank Name:		A/c Name:	
Bank A/c Number:		Sort Code:	

#### Sole Trader/Partner 1/Director 1

#### Partner 2/Director 2

Full Name:		DOB:		Full Name:		DOB:	
Home Address:				Home Address:			
Postcode				Postcode			

<b>Bank Reference</b>	<b>Trade Reference 1</b>	<b>Trade Reference</b>
Institution Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
Address:	Address:	Address:
Postcode	Postcode	Postcode
Telephone No:	Telephone No:	Telephone No:
Duration of Relationship:	A/C Open Since:	A/C Open Since:
	Credit Limit:	Credit Limit:
<b>Expected Monthly Sales:   £</b>	<b>Expected Monthly Sales:   £</b>	

### **Agreement to the Company's Terms and Conditions**

**1. The Customer notes and agrees that the Company's Terms and Conditions for the Supply of Goods and or Services ("the Terms") which the Customer has received or are attached will apply to all sales to the Customer, and that the Customer will abide by the Terms in relation to each transaction. The Customer accepts and agrees that the Company may vary those Terms from time to time and that the Terms as varied on each occasion will apply to those transactions taking place after the Company has notified it of the variation.**

**2. The Customer notes and agrees that if the Company accepts this application, the Terms will thereby be varied so as to allow the Customer payment terms of 30 days from the date of invoice. The Customer hereby confirms that if credit facilities are approved it will pay the account as per those payment terms and it agrees that if it does not pay the account as per those payment terms, the Company may forthwith, without notice, withdraw the credit facility and that all sums then outstanding will become due forthwith.**

**3. In processing this application for credit facilities the Company will make enquiries of credit reference agencies and other third parties who may record those enquiries. The Company may also disclose information about the conduct of the Customer's account to credit reference agencies and other third parties. The information obtained from or provided to credit reference agencies or other third parties may be used when assessing further applications for credit terms, for debt collection, for tracing and for fraud prevention.**

**4. The Customer hereby consents to a credit search being made on the Customer and the signatory below hereby consents to a credit search being made on him/her as owner/partner or director of the Customer, both now and at any future date.**

**5. The signatory below declares that the information given above is accurate. This application must be signed by a Director/Partner/Proprietor of the Customer.**

**Signed:**

**Print Name:**

**Date:**

**Position:**