

**NORFOLK
LOGISTICS**



CREDIT APPLICATION FORM

BUSINESS CONTACT INFORMATION

Title:

Company name:

Phone:

Fax:

E-mail:

Registered company address:

City:

County:

Post Code:

Date business commenced:

VAT No.

Sole proprietorship:

Partnership:

Corporation:

Company number:

BUSINESS AND CREDIT INFORMATION

Primary business address:

City:

County:

Post Code:

Year Established:

Telephone:

Fax:

E-mail:

Bank name:

Bank address:

Phone:

City:

County:

Post Code:

Sort Code

Account number

BUSINESS/TRADE REFERENCES

Company name:

Address:

City:

Count:

Post Code:

Phone:

Fax:

E-mail:

Company name:

Address:

City:

County:

Code:

Phone:

Fax:

E-mail:

AGREEMENT

1. All invoices are to be paid 30 days from the date of the invoice.
2. Claims arising from invoices must be made within seven working days.
3. By submitting this application, you authorize Norfolk Logistics Ltd. to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURES

Title:

Date:

Title:

Date:

Norfolk Logistics Limited.

Registered office: Old Station Yard, Station Lane, Trimley St Mary, Felixstowe, Suffolk. IP11 0UB.

Registered in England number 7197051. VAT number 104188438.