



NEW ACCOUNT APPLICATION FORM

Business Name:

Main Contact: Managing Director:

Address:

..... Post Code:.....

Telephone: Fax:

Email Address:.....

Style of Organisation: *Limited Company / Sole Trader / Partnership *Delete as appropriate

VAT Number: If Limited please state Company Reg. No:

If a Sole Trader / Partnership, please supply full name(s) home address(s) and telephone no.(s) of proprietor / partners

Full Name(s)

Home Address(s)

Home Tel. No.(s)

Trading Since:

Requested Credit Limit:This credit limit reflects the maximum amount of credit allowed at any one time

Name of Bank:Telephone No.

Trade Ref 1: Contact name:

Telephone: Fax:

Trade Ref 2: Contact name:

Telephone: Fax:

All sales will be subject to Anglo Norden Forest Products Ltd's terms and conditions of trading.
I/We confirm that the information given in this application for a credit account is in all respects true and accurate.

Signed:Position:Date:

Accounts & credit Limits will be set based on an independently prepared credit status report and are not at the discretion of any Anglo Norden Forest Products Employee

Upon successful application, Terms & Conditions of Trading will be provided for the signature before initial orders are fulfilled.

Many thanks for completing this information please return to:

**Orwell Terminal, Eagle Wharf, Helena Road, Ipswich, Suffolk, England, IP3 0BT
E: sales@anglonorden.co.uk W: www.anglonorden.co.uk T: 01473 233244 F: 01473 230805**



ANGLO NORDEN