

NEW ACCOUNT APPLICATION FORM

Please ensure that all questions marked with an asterisk * are completed

In order for us to conform to our quality assurance/credit facility. Please complete all parts of this application form and endorse your acceptance of our terms with a responsible signatory. The information will be considered confidential and will enable us to operate within our quality assurance guidelines

FULL COMPANY NAME	
ADDRESS	
POSTCODE	
TEL NO	FAX NO
EMAIL	
NAMES OF DIRECTORS/PARTNERS	
<input type="checkbox"/> LIMITED COMPANY* <input type="checkbox"/> SOLE TRADER* <input type="checkbox"/> NO OF EMPLOYEES*	
VAT REG NO*	COMPANY REG NO*

ACCOUNTS CONTACT

NAME*	EMAIL*
TEL NO*	FAX NO*

BANKING DETAILS

BANK	
ADDRESS	
POSTCODE	
TEL NO	ACCOUNT NAME
ACCOUNT NO	SORT CODE



APPROXIMATE ANNUAL SPEND WITH RAYFLEX RUBBER LTD?*

WHICH PRODUCTS ARE YOU WISHING TO PURCHASE? *

TRADE REFERENCES

FULL COMPANY NAME

ADDRESS

POSTCODE

TEL NO

FAX NO

CONTACT

EMAIL

FULL COMPANY NAME

ADDRESS

POSTCODE

TEL NO

FAX NO

CONTACT

EMAIL

BRIEF DESCRIPTION OF THE NATURE OF YOUR BUSINESS

CREDIT TERMS: PAYMENT STRICTLY 30 DAYS INTEREST CHARGED AT 3% OVER BASE RATE



Retention of title: notwithstanding delivery and the passing of risk in the goods or any provision of these conditions the property and the goods shall not pass to the buyer until the seller has received in cash or cleared funds payment in full the price of the goods and all other goods agreed to be sold by the seller to the buyer for which payment is then due.

SIGNATURE OF AUTHORITY ON BEHALF OF APPLICANT	PRINT NAME
POSITION	DATE

NOTES: RAYFLEX USE ONLY