



# Customer Account Application Form

1.1	Company Name:					
1.2	Registered Office:					
		Post Code:		County:		
1.3	Invoice Address: (if different from usual operating address)					
		Post Code:		County:		
1.4	Company Type <input checked="" type="checkbox"/>	PLC	LTD	LLP	Partnership	Sole Trader
1.5	Nature of Business:					
1.6	Company registration No.	Company VAT No.				
1.7	Contact (to request order nos):	Position in Company:				
1.8	Tel:	Fax:	E-mail:			
1.9	Contact (accounts payable):	Position in Company:				
2.0	Tel:	Fax:	E-mail:			
<b>Please provide two trade references and bank information</b>						
2.1	Company Name:					
2.2	Contact Name:	Tel:		Fax:		
2.3	Address:					
		Post Code:		County:		
2.4	Company Name:					
2.5	Contact Name:	Tel:		Fax:		
2.6	Address:					
		Post Code:		County:		
<b>A trading account is provided on the basis of being subject to our Terms &amp; Condition of sale</b>						
2.7	<b>Bank Details</b>					
2.8	Bank Name:	Account Name:				
2.9	Address:				Post Code:	
3.0	Bank Account Number:	Sort Code:				
<b>Consent</b>						
3.1	<b>Consent</b> I/We authorise the above named bank to provide bankers opinion concerning my/our ability to meet a financial commitment of £ per month. We agree to payment of 30 days nett unless agreed otherwise					
3.2	Print Name:	On Behalf of:				
3.3	Authorised Signatory:	Date:				
<b>For office use only</b>						
Account No:		Created By:		Equifax report attached		Yes/No
Credit Limit Agreed: £		\$	€	Credit Terms Agreed:		
Account authorised by:			Position:		Date:	
Please return all completed forms to: <i>TCL Tankers, Lotherton Way, Garforth, Leeds, West Yorkshire LS25 2JY Fax. +44(0) 113 286 4422</i>						