HIRE STANDARDS
PLANT TOOL & LEISURE HIRE

5 Washington Road
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APPLICATION FOR A CREDIT ACCOUNT ☐☐☐☐

I/WE MAKE APPLICATION FOR A MONTHLY CREDIT ACCOUNT

COMPANY NAME:
ADDRESS:

POSTCODE:
TEL NO:
FAX NO:
MOBILE NO:

ACC TEL NO:
NAME FOR ACCOUNTS MATTER?

INVOICE ADDRESS IF DIFFERENT FROM ABOVE

POSTCODE

COMPANY REG NO: VAT NO:

SOLE TRADER ☐ PARTNERSHIP ☐ DIRECTORS ☐

NAMES & ADDRESS OF ALL DIRECTORS/PARTNERS/SOLE TRADER PLC ☐ LTD ☐

POSTCODE

POSTCODE

HOW LONG ESTABLISHED?
ANTICIPATED TOTAL CREDIT LIMIT REQUIRED?
TYPE OF BUSINESS?

TRADE REFERENCE (NO HIRE COMPANIES)

1) NAME
ADDRESS

TEL NO:

2) NAME
ADDRESS

TEL NO:

HAVE YOU ANY ASSOCIATION WITH THE ABOVE COMPANIES YES ☐ NO ☐

BANKERS
ADDRESS

SORT CODE:
ACCOUNT NO:

HAS ANY DIRECTOR OR PARTNER BEEN ASSOCIATED WITH A FAILED BUSINESS? YES ☐ NO ☐

COMMENTS

ALL INFORMATION WILL BE TREATED IN THE STRICTEST OF CONFIDENCE.

IN APPLYING FOR A CREDIT ACCOUNT, I/WE AGREE TO ADHERE TO THE TERMS AND CONDITIONS PRINTED ON THE REVERSE OF THE CUSTOMER COPY HIRE CONTRACT

NAME _____ SIGNED_____

POSITION IN COMPANY _____ DATE_____

PLEASE ATTACH COMPANY LETTERHEAD TO THIS FORM