

**CREDIT APPLICATION FORM**

Please complete the following details and return the form to us at the address below.  
Thank you for your help.

Company Details, Name & Address

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.....  
.....  
.....

How long has your Company been trading.....

How long has it traded at this address .....

How many people does the Company employ ..... ?

What are the names of   The Managing Director .....  
                                  The Finance Manager .....  
                                  The Technical Manager .....  
                                  The contact for invoice payment queries .....

Does the company pay its bills broadly in line with its suppliers terms of sale .....

Registered Office Address .....

.....  
.....

Company registration number .....

Company VAT number .....

Name of Bank .....

Bank address .....

.....

Trade reference (1) .....

..... Tel: .....

Trade reference (2) .....

..... Tel: .....

We agree to settle invoices in a timely manner and within **30 days from the invoice date.**

Signed .....Name.....Position .....

This form can only be authorised by an officer of the company.

Please return to:- SIKO Ltd

Unit 6, Cod Beck Ind. Estate

Dalton

THIRSK, YO7 1HR

Tel:- 01845 578966

Fax:- 01845 577781

e-mail:- siko-uk.com

Registered in England No 2684424

# **FAXBACK**

Company Details  
Name & Address

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.....  
.....  
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.....  
.....

## **Re - Terms and Conditions of Sale**

We agree to your standard Terms and Conditions of Sale

Signed ..... Position .....

Print Name ..... Date .....

Please Fax Directly to 01845 577781

Angela Eilbeck - Credit Controller