

# TRADING and / or CREDIT ACCOUNT APPLICATION \*

Please return this form to: **EMMA HUGHES  
FREQUENCY DISTRIBUTION LTD  
UNIT 1, 11, FIELDINGS ROAD,  
CHESHUNT  
HERTFORDSHIRE EN8 9TL U.K.**  
**PLEASE ✓ YOUR AFFILIATED DEPOT  
ON PAGE 2 OF THIS FORM – THANK YOU.**

PRIVATE AND CONFIDENTIAL

Please complete all sections fully and print clearly in BLOCK capitals !

DETAILS OF TRADE APPLICANT			
Trading name and address of account :			
		Post code :	
Telephone number (inc. STD Code) :		Mobile number :	
Registered name (if different) and registered office address :			
		Post code :	
VAT registration number:			
Name and address where accounts are paid from :			
		Post code:	
Name of contact :		Job title :	
Telephone number :		Extn	Mobile number :
Main Activity :			
Structure of organisation : eg. Sole proprietor, partnership, co-operative, private Ltd. Co., plc./ etc			
Type of premises : eg. Shop, office, factory, warehouse, etc			No. of employees at this address :
Names of executives :		Titles e.g. MD, Sole prop, Co.sec :	
Business incorporated under Companies Act 1948 :			
Share Capital – authorised		Share Capital - issued	
Date of formation :		Date of financial year – end :	
Company Registration number :		Country of registration :	
Name and address of ultimate holding company :			
			Post code :
Total no. of employees in group :		No. of locations / premises :	

REFERENCES ( complete all remaining sections on both pages for a 30 Day Credit A/C facility )			
<b>BANK HOLDING MAIN ACCOUNT</b>		<b>SECONDARY BANKERS</b>	
Name and address :		Name and address :	
Sort code :		Post code :	
Name of account :		Name of account :	
Account number :	How long open ?	Account number :	How long open ?
<b>TRADE REFERENCE – SUPPLIER 1</b>		<b>TRADE REFERENCE – SUPPLIER 2</b>	
Name and address :		Name and address :	
	Post code :		Post code :
Main trading activity :	Period traded with supplier :	Main trading activity :	Period traded with supplier :
Contact name :	Telephone number :	Contact name :	Telephone number :

# EXTENT OF CREDIT (continue and complete this page if applying for a 30 day Credit A/C)

<b>Please state the amount of credit required :</b>	<b>Estimated value of total annual purchases :</b>
£	£
<b>On what basis have the above amounts been calculated ? (details of products / services required )</b>	
<b>Normal payment period from receipt of invoice :</b>	<b>Method of settling account e.g. cheque,</b>

## PURCHASE PROCEDURES

<b>Person(s) (Name / job title) authorised to place orders on your behalf :</b>
<b>Please state any special purchase conditions or procedures :</b>
<b>What trading terms do you extend to your own customers ?</b>

## AUTHORISATION FOR THIS APPLICATION

<b>Name of person authorising application (print) :</b>	<b>Signature :</b>
<b>Job title of signatory (print) :</b>	<b>Date :</b>

Finally, please indicate (✓) your local depot:

Unit 1, 11 Fieldings Road,  
**Cheshunt**,  
Hertfordshire EN8 9TL  
Tel: 08444 632550  
Fax: 08444 632551

14 Zobel Close  
Sweetbriar Ind. Estate  
**Norwich**, Norfolk NR3 2BY  
Tel: 08444 632552  
Fax: 08444 632553

14 Little Mead Ind. Estate  
Alfold Road,  
**Cranleigh**, Surrey GU6 8ND  
Tel: 08444 632554  
Fax: 08444 632555

1 Mariner Business Park  
1 Kingsway  
**Croydon**, Surrey CR0 4GE  
Tel: 08444 632556  
Fax: 08444 632557

<b>For Frequency Distribution Ltd - Office Use Only:</b>

**\* Strictly subject to Frequency Distribution's 'Terms and Conditions of Sale'**