

Retail: 0345 299 7955
Wholesale: 01773 600400
Accounts: 01773 572372



Head Office
Eden House, High Holborn Rd,
Codnor Gate Industrial Estate,
Ripley, Derbyshire DE5 3NW

EDEN TYRE SALES LTD

APPLICATION TO OPEN OR TO CONTINUE A CREDIT ACCOUNT

FULL TRADING NAME:	For Office Use
BUSINESS ADDRESS:	Depot code:
POSTCODE:	Customer Type:
TELEPHONE NUMBER:	Source Code:
EMAIL ADDRESS:	List:

PLEASE ATTACH A COPY OF A BUSINESS LETTERHEAD

TRADING STATUS

(PLEASE MARK AS APPROPRIATE)

- PLC
LIMITED COMPANY
PARTNERSHIP
SOLETRADER

IF PLC OR LIMITED PLEASE STATE REGISTRATION NO:

REGISTERED OFFICE ADDRESS IF DIFFERENT FROM ABOVE:

IF PARTNERSHIP OR SOLETRADER

FULL NAME OF PROPRIETOR OR FIRST PARTNER:

HOME ADDRESS:
POSTCODE:

HOME PHONE NUMBER: DATE OF BIRTH:

FULL NAME OF SECOND PARTNER:

HOME ADDRESS:
POSTCODE:

HOME PHONE NUMBER: DATE OF BIRTH:

IF ANY FURTHER PARTNERS PLEASE PUT ON A SEPARATE SHEET

PAYMENT CONTACT DETAILS

NAME:

ADDRESS:
POSTCODE:

TELEPHONE: FAX NUMBER:

EMAIL ADDRESS:

NUMBER OF YEARS TRADING: TYPE OF BUSINESS:

ESTIMATED ANNUAL VALUE OF ALL PURCHASES:

PLEASE STATE WHY YOU ARE COMPLETING THIS FORM:

- UPDATE MY ACCOUNT DETAILS
- APPLYING FOR A CASH OR CHEQUE UPON DELIVERY
- APPLYING FOR A WEEKLY CREDIT ACCOUNT
- APPLYING FOR A 30 DAY CREDIT ACCOUNT

BANK DETAILS

NAME:

ADDRESS:

POSTCODE:

TELEPHONE:

SORT CODE:

ACCOUNT NO:

TRADE REFERENCES

CONTACT NAME:

POSITION IN COMPANY:

COMPANY NAME:

ADDRESS:

POSTCODE:

TELEPHONE:

FAX NUMBER:

EMAIL ADDRESS:

CONTACT NAME:

POSITION IN COMPANY:

COMPANY NAME:

ADDRESS:

POSTCODE:

TELEPHONE:

FAX NUMBER:

EMAIL ADDRESS:

I / WE HEREBY REQUEST THAT EDEN TYRE SALES LIMITED TO OPEN A CREDIT ACCOUNT / RENEW AND CONTINUE A CREDIT ACCOUNT.

I / WE DECLARE THAT THE ABOVE INFORMATION GIVEN IS CORRECT TO THE BEST OF MY/OUR KNOWLEDGE AND BELIEF.

I / WE UNDERSTAND AND AGREE THAT ALL PURCHASES MADE BY ME/US ARE SUBJECT TO THE TERMS AND CONDITIONS OF SALE OF EDEN TYRE SALES LIMITED FROM TIME TO TIME INFORCE .

I / WE HEREBY ACKNOWLEDGE RECEIPT OF SUCH CONDITIONS OF SALE.

I / WE AGREE TO CREDIT REFERENCES BEING TAKEN.

SIGNED:

NAME:

POSITION / TITLE:

FOR AND ON BEHALF OF:

(TO BE SIGNED BY A DIRECTOR OR OFFICER OF THE COMPANY IF LTD)

DATE: