

## APPLICATION FOR FREIGHT & ANCILLIARIES CREDIT ACCOUNT

Full name of applicant:

Accounts email address:

Accounts telephone number:

Accounts contact name & position:

Operations contact No 1: Name, email & telephone.




Operations contact No 2: Name, email & telephone.




If there are any operational restrictions: i.e. Delivery yard space, special equipment needed, 7.5 ton only, flat bed only, etc, please enter in the field to the right.

Trading / Office / Accounts address:

Registered address (if different to trading):

Cargo address (if different to trading):

Registered company number:

EORI number:

VAT number:

Customs deferment number (If applicable):

\*Full name, address and date of birth of proprietor:




Is the company a member of a larger group?

Yes  No

If yes, please advise company name:

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Bank name and address:

Sort code:

Account number:

Trade reference number 1: Name, address, telephone & email

Trade reference number 2: Name, address, telephone & email

Credit required. In £ sterling per month:

Accounts email address:

A credit account is applicable for freight and ancillary charges only (not Vat/Duty/Tax related fee's)

## Declaration by applicant seeking credit on behalf of a business

- Credit will only be given if all credit checks are successful.
- Applying for credit doesn't guarantee that credit will be given. Credit will be given if all credit checks are successful.
- In consideration of your company agreeing to supply services to the applicant company on credit, we the undersigned (or signed on behalf by authorised staff) being owners/directors of the applicant company jointly and severally guarantee payment of all financial obligations to Supreme Freight Services Ltd and it's subsidiaries and successors including financial obligations arising from increase in the credit limit granted by Supreme Freight Services Ltd or subsidiaries and successors from time to time following review of the applicant's account.
- We/I authorise our bankers to provide an opinion as to our suitability for the requested account.

Full name (must be signed by a Director):

Signature:

Position:

Date:

Please print & sign the document and return to:

**Supreme Freight Services Ltd, 160 Millbrook Road East, Southampton SO15 1JR**

**T:** +44 (0) 2380 337778 **E:** enquires@supremefreight.com