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| --- | --- | --- | --- | --- |
| **Company Name:** |  | | | |
|
| **Address:** |  | | | |
|
| **Registered Office If Different:** |  | | | |
|
| **Company Type (please highlight):** | **Sole Trader** | **Partnership** | **Limited Company** | **PLC** |
| **Company Registration No:** |  | | **VAT No:** |  |
| **Telephone:** |  | | | |
| **Name of Directors:** |  | | | |
| **Waste Carriers Licence:** |  | | | |
| **Number Of Years Trading:** |  | | **SIC code:** |  |
| **Account Queries Contact Name** |  | | | |
| **Accounts Email Address:** |  | | | |
| **Credit Amount Required:** |  | | | |
| **Bank Name and Branch Address:** |  | | | |
|  |
|  |
| **Sort Code:** |  | | **Account No:** |  |
|  |  |  |  |  |
| **Authorised Signatory:** |  | | | |
| **Print Name:** |  | | | |
| **Date:** |  | | | |
| **Internal Use Signatory:** |  | | | |
| **Internal Use Credit Limit Given:** |  | | | |
|  |  |  |  |  |
| **\*PLEASE NOTE CREDIT TERMS ARE 30 DAYS FROM DATE OF INVOICE\*** | | | | |
| **Please allow 3 working days to get the account opened** | | | | |