CAMLAB LIMITED - APPLICATION FOR A CREDIT ACCOUNT



Customer:	
	Registered Number:
Principal Activity: (For Customer Classification Only)	VAT Number:
	No. of years trading:
Invoice Address:	Statement Address:
Post Code:	Post Code:
Main Phone:	Accounts Phone:
Fax:	Fax:
Invoice Email:	Statement email:
	Contact:
Registered Office:	
-	
Post Code:	
rost code:	
Bank Details:	
Bank/Branch:	Parent Company:
Sortcode: Account No:	
Details of Directors/Owners (including home address & personal det	tails if not a Ltd co.)
Name:	Name:
Title:	Title:
Address:	Address:
Dect Code:	Dest Code:
Post Code:	Post Code:
Full Forename(s)	Full Forename(s)
Date of Birth	Date of Birth
Camlab will make a search with a credit reference agency, who will keep a record of that search and will share that information with other	
businesses. Camlab may also make enquiries about Principal Directors/Owners with a credit reference agency	
Trade References:	
Trade Reference 1:	Trade Reference 2:
Address:	Address:
Post Code:	Post Code:
TOST COUE.	1031 Code.
I/We hereby apply for a credit account with Camlab Ltd. I/We have re	
General Terms and Conditions' and understand they will apply to all	
In particular we agree to Camlab's payment terms which are 30 Days	s from date of invoice.
Signed by:	Name: (Please print)
	Position:
Date:	
Who is authorised to sign on behalf of the above named customer.	
Please return the signed form by em	ail to finance@camlab.co.uk
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