



Certificate Number: 8609
ISO 9001:2015



CREDIT APPLICATION FORM

Mill Street, Radcliffe, Manchester, M26 1AL, UK

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TO BE COMPLETED BY ALL APPLICANTS

Please complete the document and print off and sign before returning by email or post

COMPANY NAME:

REGISTERED NUMBER:

YEAR BUSINESS STARTED:

REGISTERED OFFICE ADDRESS:

TRADING ADDRESS (IF DIFFERENT FROM
REGISTERED OFFICE ADDRESS)

CONTACT NAME:

TELEPHONE:

ACCOUNTS CONTACT:

TELEPHONE:

EMAIL ADDRESS:

PURCHASING CONTACT:

TELEPHONE:

EMAIL ADDRESS:

DIRECTORS:

INVOICES ARE TO BE SENT TO (TICK BOX TO CONFIRM):

☐

REGISTERED OFFICE ADDRESS

☐

TRADING ADDRESS

I / WE TRADE AS A (TICK BOX TO CONFIRM):

☐

SOLE TRADER OR PARTNERSHIP

☐

LIMITED COMPANY

CREDIT APPLICATION FORM (CONTINUED)



TO BE COMPLETED BY ALL APPLICANTS

TRADE REFERENCE NO. 1:

TRADE REFERENCE NO. 2:

TELEPHONE:

TELEPHONE:

EMAIL ADDRESS:

EMAIL ADDRESS:

I / WE SHOULD BE OBLIGED IF YOU WOULD GRANT
ME / US A CREDIT ACCOUNT WITH A MAXIMUM LIMIT OF:

£

I / WE AGREE TO COMPLY WITH YOUR CONDITIONS OF HIRE AND MONTHLY ACCOUNTS ARE DUE FOR SETTLEMENT AT THE END OF THE MONTH FOLLOWING DELIVERY, WHERE THESE FACILITIES ARE EXCEEDED THE OWNER SHALL BE ENTITLED TO INTEREST ON THE AMOUNT THAT IS OVERDUE AT THE BANK OF ENGLAND BASE RATE PLUS 4% CALCULATED ON A DAY TO DAY BASIS. THIS SHALL BE WITHOUT PREJUDICE TO ANY OTHER RIGHTS OR REMEDIES OF THE OWNER. ANY LEGAL CHARGES INCURRED IN THE RECOVERY OF MONEY OR EQUIPMENT WILL BE PAID BY THE HIRER.

IN PROCESSING YOUR APPLICATION FOR CREDIT FACILITIES WE MAY MAKE ENQUIRIES OF CREDIT REFERENCE AGENCIES OR OTHER THIRD PARTIES WHO MAY RECORD THOSE ENQUIRIES. WE MAY ALSO DISCLOSE INFORMATION ABOUT THE CONDUCT OF YOUR ACCOUNT WITH US TO CREDIT REFERENCE AGENCIES OR OTHER THIRD PARTIES. THE INFORMATION OBTAINED FROM OR PROVIDED TO CREDIT REFERENCE AGENCIES OR OTHER THIRD PARTIES MAY BE USED WHEN ASSESSING FURTHER APPLICATIONS FOR CREDIT TERMS, FOR DEBT COLLECTION, FOR TRACING AND FRAUD PREVENTION.

PLEASE SEND THE FOLLOWING DOCUMENTS WITH YOUR APPLICATION (TICK BOXES TO CONFIRM)

☐

A COPY OF YOUR COMPANY LETTERHEAD

☐

PROOF OF INSURANCE FOR HIRED IN PLANT

NAME:

POSITION:

DATE:

SIGNATURE:

Please print off the document and sign before returning by email or post.

Email:

accounts@pjpuk.com

Post:

PJP (UK) Limited
Mill Street
Radcliffe
Manchester
M26 1AL