



Customer Credit Account Application

Please complete and return this form, confirming the credit limit that you require and the trading terms.

Company Name	
Registered No.	
Address	
Name of Accounts Person	
Accounts Telephone No.	
Email Address for Invoices / Statements	<i>(insert "POST" if you prefer them posted)</i>

Credit Limit Required	£
Trading Terms	30 DAYS

(Flexo Office Use)

Approved By / Date	Limit / Terms
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