



Independent Mobile 'Phone Specialists

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APPLICATION TO OPEN A TRADE CREDIT ACCOUNT

(Please answer all questions in BLOCK CAPITALS)

Company Information

Company Name
Trading Name
Address
Post Code
Telephone
Fax
Email
Type of Company (please tick) Limited Co. PLC Partnership Sole Trader
Company Reg. No. Date the Bus began VAT Registration Number
If a Partnership please give full names, date of birth and home addresses of TWO Senior Partners
Full Name Date Of Birth
Private Address
Full Name Date Of Birth
Private Address

Billing

Address for invoice / Statements (if different from above)
Telephone Fax email
Contact name for Accounts Direct Line

Banking

Name and Address of Bank
Post Code
Sort Code Account Number
Account Name

Agreement

I/we the undersigned agreed to adhere to CBS Communications Centre Limited's standard conditions of sale, a copy of which is attached for your reference and retention

Signed Name (PRINT)

Position Date