Credit Account Application Form

Please complete the form and return to the address at bottom of this page

Company Name: _____

Address: _____

_____

Post Code: _____

Tel No.: _____

Fax No.: _____

E-mail: _____

VAT No.: _____

Company Reg. No.: _____

Date Company Established: _____

Purchase Ledger Contact: _____

Invoice Address: _____

_____

_____

Post Code: _____

Direct Tel No.: _____

Fax No.: _____

E-mail: _____

Amount of Monthly Credit required: £_____

Business Type (If not Limited) Partnership, Sole Trader, Charity, other**:** _____

Registered Office Address (if different from above): _____

_____

Names of Directors/Partners/Proprietor: _____

Names of Authorised Buyers: _____

Declaration of Credit Application:

I the undersigned, is authorised to accept Lanemark Combustion Engineering Ltd Payment Terms of 30 days from date of invoice, and accept Lanemark Combustion Engineering Ltd Terms and Conditions of Sale.

Signed: _____ **Name (Print in Capitals):** _____

Company Position: _____ **Date:** _____

QAF 01-27
IMS Iss:1 Rev: 1

Registered Address: Lanemark House, Whitacre Road, Nuneaton, Warwickshire, UK, CV11 6BW
T: +44 (0) 24 7635 2000 F: +44 (0) 24 7634 1166 E: info@lanemark.com W: www.lanemark.com
Company Registration No. 05471903. VAT No. GB 185 5272 84 .
Place of Registration: England and Wales. Directors: P.R. Collier, J.S. Foster, A.E. Thompson.