

Contact

Account Application Form

APPLICATION TO OPEN CREDIT FACILITIES WITH 'AXTELL LIMITED' Polo House, Home Farm, Bypass Road, Hurtmore, Surrey, GU8 6BS

Switchboard Tel: 01483 203447

Accounts Email: accounts@axtell.co.uk

Accounts DD: 01483 663419

PLEASE ENSURE YOU SUPPLY LETTER HEADED PAPER WITH THIS APPLICATION									
Company Na	ame			(
Trading Add	dress								
		-							
Tel No.					Website				
Contact Emai	Contact Email				Accounts Email				
Type of Busin	iess								
Legal Entity: (Legal Entity: (Ltd Company / Sole Trader / Partnership)								
If Ltd – Comp	any Regi	stration No.				Date Commen	Date Commenced Trading		
Contact Name	e					Amount of Cre	redit Required		£
Registered Of	ffice Add	lress (if different from abo	ve)						
			Details of So	ole Traders,	Partners	, Directors			
	N	lame		Nan	ne		Name		
	Ad	ldress	Address				Address		
Post Code	Post Code		Post Code			Post Code			
_									
Name of Bank									
Bank Address	5								
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References									
	Name		Name		N		Na	ime	
	Address			Address				Add	lress
		l							

AXDO0027 23.6.2021

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Tel No.		Tel No.		Tel No.					
Email		Email		Email					
I/We apply to open credit facilities with Axtell and agree to adhere to the Company's Terms and Conditions of Sale. Full permission given to Axtell to perform various searches on the above information.									
	Full Name		Authorised Signature	Date					

Office Use Only								
References Received	Credit Checks Done	Credit Checks Done Credit Given		Authorised Signature				
		£						

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