



THE CAXTON PRESS  
P R I N T & D E S I G N

# C R E D I T   A P P L I C A T I O N   F O R M

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**SECTIONS 1, 2<sub>A</sub> or 2<sub>B</sub> & 3 MUST BE COMPLETED BEFORE CREDIT CAN BE GRANTED.**

Thank you for choosing to do business with us.

**1**

## PERSONAL DETAILS

Account Name \_\_\_\_\_

P O Box \_\_\_\_\_

Street Address \_\_\_\_\_

Contact Name \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

Bank and Branch \_\_\_\_\_

### Credit References

1. \_\_\_\_\_ Phone \_\_\_\_\_

2. \_\_\_\_\_ Phone \_\_\_\_\_

3. \_\_\_\_\_ Phone \_\_\_\_\_

**2<sub>A</sub>**

**INDIVIDUAL/SOLE TRADER** – (complete one name below)

**PARTNERSHIPS** – (complete two names below)

Surname \_\_\_\_\_ First Names \_\_\_\_\_ D.O.B. \_ / \_ / \_

Residential Address \_\_\_\_\_ Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Name of Employer \_\_\_\_\_

Surname \_\_\_\_\_ First Names \_\_\_\_\_ D.O.B. \_ / \_ / \_

Residential Address \_\_\_\_\_ Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Name of Employer \_\_\_\_\_

**COMPANIES** – (complete Section 2<sub>B</sub> on reverse side)

## 2B

### COMPANIES

Registered Name of Company \_\_\_\_\_

Date of Registration \_\_\_\_\_

Company Registration Number \_\_\_\_\_

Trading Name (if different) \_\_\_\_\_

#### Full Names & Addresses of Directors/Shareholders & Date of Birth

1. \_\_\_\_\_ D.O.B. \_\_\_ / \_\_\_ / \_\_\_

2. \_\_\_\_\_ D.O.B. \_\_\_ / \_\_\_ / \_\_\_

3. \_\_\_\_\_ D.O.B. \_\_\_ / \_\_\_ / \_\_\_

Accountant \_\_\_\_\_ Phone \_\_\_\_\_

Solicitor \_\_\_\_\_ Phone \_\_\_\_\_

#### Personal Guarantee Only For Limited Liability Companies

I/we the guarantor/s acknowledge that i/we understand all the provisions and terms of this application and agree that in the consideration of The Caxton Press agreeing to supply the above applicant with goods and services from time to time, the guarantor/s will pay all such moneys upon demand and shall be liable as a principal debtor in respect The Caxton Press.

Full Name of Guarantor \_\_\_\_\_ D.O.B. \_\_\_ / \_\_\_ / \_\_\_

Signature \_\_\_\_\_ Date \_\_\_ / \_\_\_ / \_\_\_

## 3

### PAYMENT TERMS & CONDITIONS

I/we apply to open a monthly credit account and acknowledge that i/we have read the terms stated and agree to abide by the terms.

1. Payment is due on the 20th day of the month following delivery. Failure to do so may result in the stopping of credit facilities without notice, until payment is made. Overdue accounts may incur interest charges at 2% above bank overdraft interest rate.
2. Continued noncompliance will result in the account being closed and legal action taken to recover the amounts outstanding. All costs of collection including debt collector's fees will be added to the account. I/we authorise any seller or person to irrevocably provide you with such information as you may require in response to your credit enquiries for your provision of credit to me/us. I/we further authorise you to furnish any third party and details contained in this application and any further details of subsequent dealings that i/we may have as a result of this application being actioned by you and to use for any lawful purpose connected with our business, any information which i/we or any third party may provide.
3. Invoiced goods remain the property of The Caxton Press until payment is received in full.

Signed \_\_\_\_\_

Full Name of Signatory \_\_\_\_\_ Date \_\_\_ / \_\_\_ / \_\_\_