

WE DISCOVER
YOU CREATE



Credit Account Application Form

Trading Title:
Address:
Postcode:
Tel No.:
Email:
Name of Buyer:
Accounts Address (if different from above):
Postcode:
Accounts Tel:
Accounts Email:

Total Credit Request: £
Nature of Type of Business:

Business Type:	<input type="checkbox"/> Limited Company	<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Trader
Registration No.:			
Names & Addresses of Partners / Proprietors:			

Please provide details for TWO trade references:

www.silvatimber.co.uk | enquiries@silvatimber.co.uk | 0151 495 3111 | 020 8150 8055



Registered Office: Halebank House, Pickerings Road, Widnes, WA8 8FY
Registered in England and Wales No: 4626406
VAT Registration Number: 756 3271 21

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Name:
Address:
Postcode:
Tel No.:
Email:
Name:
Address:
Postcode:
Tel No.:
Email:

Bank details:

Name:	
Address:	
Postcode:	
Account No:	Sort Code:

We/I hereby apply for a monthly credit account and agree that all transactions will be conducted in accordance with the 'Conditions of Sale' as laid down by Silva Timber Products Ltd.

Signed:	Date:
Print Name:	Proprietor / Director / Partner {Please delete as appropriate}

Please return with a copy of your business letterhead

Alpha Sort:	County:
Territory:	Pass to Accounts:
Industrial Class:	Initials:
Refs applied for:	

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