

Spirit Circuits Limited

Application for Credit Facility



COMPANY DETAILS :

Full Company Trading Name:		
Address:		Registered No:
		VAT Reg No:
		Website:
		<input type="checkbox"/> Plc <input type="checkbox"/> Limited Co
	Post Code :	<input type="checkbox"/> Partnership* <input type="checkbox"/> Sole Trader*
No of Years Trading :	Annual Turnover :	No of Employees :
Please provide a brief description of your Company's activities:		

CONTACT DETAILS :

	Purchasing Contact	Accounts Contact
Name:		
Position:		
Phone:		
Fax:		
E-mail:		

FINANCIAL DETAILS :

Bank:		Amount of Credit Required per Month : £ Note : Our standard credit terms are 30 days from date of invoice – see note 3 below
Branch Address:		
Sort Code:		

ADDITIONAL INFORMATION – Please supply the following :

1. Original/Copy of your Company Letterhead.
2. * If you are a partnership/sole trader, please supply names and home addresses of all partners.
3. Extended credit terms may be offered subject to receipt of a written application. Please note that extended terms may reduce your overall credit limit.

Name:	
Position:	
Date:	
Signature:	

Thank you for taking the time to complete this form.
Please return it by Post or Fax to:

Steven Wiggins
Spirit Circuits Ltd
Aston Road
Waterlooville
Hampshire
PO7 7XJ

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