

APPLICATION FOR CREDIT

FAO	Credit control / June Parrott
то	Hills Waste Solutions Ltd / Hills Quarry Products Ltd Wiltshire House, County Park Business Centre, Shrivenham Road, Swindon SN1 2NR Tel: 01793 781160 Fax: 01793 781201 Email: credit.control@hills-group.co.uk
FROM	
DATE:	
SUBJECT	Application for Credit

Please complete in full and return the enclosed application and consent forms to the above address. The following details should be noted:

- 1. The original signed forms and direct debit mandate <u>must</u> be returned by post. (If the application is urgent you may <u>also</u> send a copy on fax number 01793 781201 or by email credit.control@hills-group.co.uk, to allow the credit vetting procedure to commence.)
- 2. Please enclose a sample of your company headed paper.

Incomplete forms may delay the processing of your credit application.

Regards

Credit management



CREDIT APPLICATION FORM

Please complete in **BLACK CAPITALS** and return to the address above. A copy of your **company headed paper** must be enclosed.

Full trading title/name:			Company Registration Number:
Invoice address including postcode:		Statement address, including postcode (if different)	
	L		
Accounts contact details:		Registered office address	
Phone:			
Email:			
Fax:	-	Standard Industry Classifiest	ian (SIC) Code 2007;
Mobile:		Standard Industry Classificat	1011 (SIC) Code 2007.

Sole Trader/Partnership. Full name(s), address(es) and date of birth*(mandatory) of principal individuals/partners.

Title:	Title:
Surname:	Surname:
Forenames:	Forenames:
* Date of birth:	* Date of birth:
Residential address including postcode:	Residential address including postcode:

Hills Sales Representative:_____

Credit limit required:_____

Required services (please tick)			
Hills Waste Solution Ltd	Hills Quarry Products Ltd		
Waste (skips)	Aggregates		
Recycling	Concrete		
Landfill	Haulage		

We reserve the right to decline applications, amend or withdraw facilities subject to status and / or company policy. By signing this agreement you confirm that you are authorised to bind the account holder to this agreement and that the information given on this application is accurate. Full conditions of business are available on request.

TO BE SIGNED BY THE APPLICANT IN ACCEPTANCE OF OUR PAYMENT TERMS		
Signed:	Date:	
Print full name:	Position:	

PLEASE COMPLETE THE ATTACHED CONSENT FORM.

CONSENT FORM

TRADE REFERENCES (Not to include personal friends or relatives)

Name:	Name:
Address including postcode:	Address including postcode:
Tel no:	Tel no:
Email/fax:	Email/Fax:

Dear Sirs

CONSENT TO GIVE REFERENCES

I/we give permission to take up references at any time to access personal data from whatever source you require in order to expedite the review of a credit facility with Hills Waste Solutions Ltd/Hills Quarry Products Ltd. (We will make searches with a credit reference agency, which will keep a record of those searches and will share that information with other businesses. We may also make enquiries about the principal directors with a credit reference agency).

A copy of the Hills Group privacy statement is available on request or can be downloaded at www.hillsgroup.co.uk website.

Signed: (Sole Trader/Partner/Director)	Date:
Print full name:	Position:
Signed: (Sole Trader/Partner/Director)	Date:
Print full name:	Position:



*all details mandatory