

PLEASE RETURN THIS APPLICATION FORM TO: uk-hranipex@hranipex.com

CUSTOMER ACCOUNT APPLICATION FORM

FULL COMPANY NAME: _____

REGISTERED ADDRESS: _____

TEL NO. _____

TYPE OF BUSINESS (tick appropriate box): LTD. SOLE TRADER PARTNERSHIP

INVOICE ADDRESS (IF DIFFERENT FROM ABOVE): _____

DELIVERY ADDRESS (IF DIFFERENT FROM ABOVE): _____

REG NO.: _____

VAT NO.: _____

YEAR OF INCORPORATION: _____

ANNUAL TURNOVER £ _____

IF SOLE TRADER/ PARTNERSHIP PLEASE PROVIDE FULL NAMES, HOME ADDRESSES, DATES OF BIRTH & TELEPHONE NUMBER(S) OF ALL PARTNERS (PLEASE USE A SEPARATE SHEET IF NECESSARY)

1. _____ Date of Birth __/__/__
Tel: _____
2. _____ Date of Birth __/__/__
Tel: _____

ACCOUNTS CONTACT & EMAIL ADDRESS: _____

PURCHASING CONTACT & EMAIL ADDRESS: _____

NATURE OF BUSINESS: _____

COMPLETED BY & JOB TITLE: _____

SIGNATURE: _____

DATE: _____

CONCENT STATEMENT:

- I AGREE, TO GENERAL TERMS & CONDITIONS AND PROCESSING OF PERSONAL DATA
- I AGREE, TO E-MARKETING COMMUNICATION

PLEASE COMPLETE BELOW IF REQUESTING CREDIT ACCOUNT

TRADE REF 1: _____

TRADE REF 2: _____

ADDRESS 1: _____

ADDRESS 2: _____

CONTACT 1: _____

CONTACT 2: _____

PHONE NUMBER 1: _____

PHONE NUMBER 2: _____

CREDIT REQUIRED: _____

£

DATA PROTECTION ACT 1998

"We may make a search with a credit reference agency, which will keep a record of that search and will share that information with other businesses. We may also make enquiries about the principal directors with a credit reference agency"