

Calculux New Customer Application (PAGE 1)

This form MUST be completed in the name of an owner or director.

We also require:

- Valid Photo ID e.g. Driving license
- 2 invoices dated within previous 3 months, showing company name & address

Name:
Postion in company:
Company Name:
Company Registration No:
VAT No (if applicable):
Trading Address:
Post Code:
Delivery Address (if different)
Post Code:
Telephone:
Email:
Trade Reference 1:
Trade Reference 2:
Bank Address:
Sort Code:
Account No:

Goods are not sold on return/exchange b	asis
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Payment remain property of the company until paid in full

Any damages/shortages must be notified within 24 hours of receiving delivery

Payment must be made via BACS

This is not an application for credit

I agree that the information above is accurate to the best of my knowledge:

I have read and agree to the terms & conditions.

0'				
Signature: Print Name:				
Date:				
OFFICE USE ONLY:				
ACC. NO:	ACCTYPE:	DATE::		