



Account Application Form

Company Information (PLEASE USE BLOCK CAPITALS)

Company Name:	Invoice Address (if different):	Bank Name:
Contact Name:		Bank Address:
Registered Office Address:		
	Postcode:	
Postcode:	Industry Type:	Postcode:
Tel No:	No. Of Years Trading:	Account No.:
Fax No:	Company Reg. Number:	Sort Code:
Email:	Credit Limit Required:	

Trade Reference 1

Trade Reference 2

Company Name:		Company Name:		
Contact Name:		Contact Name:		
Address:		Address:		
Postcode:		Postcode:		
Tel No:		Tel No:		
Fax No:		Fax No:		
Email:		Email:		
Industry Sector:		Industry Sector:		
Signed:	Date:	Full Name:	Position:	For & Behalf of:

Declaration:

I have read and agree to abide by the terms and conditions overleaf and in the event that Ceildoor Products Ltd need to seek a Bank Reference I consent to the afore mentioned bank providing a reference to Ceildoor Products Ltd. I understand that all applications are subject to acceptance by Ceildoor who have the right to refuse or restrict the application.

Please complete and return this form to:

Ceildoor Products Ltd, Unit 5 Strawberry Lane Ind Estate, Strawberry Lane, Willenhall, Wolverhampton, WV13 3RS Tel: 01902 630804 Fax: 01902 739290 e-mail: accounts@ceildoorproducts.co.uk