



APPLICATION FOR PRO FORMA ACCOUNT

please fill out the application form, and return via post using the details below:

4Down Distribution Ltd . Unit 6, North Ridge Business Park, Haywood Way, Hastings, East Sussex, TN35 4PP
T: 01424 433 074 | F: 01424 714 211 | E-MAIL: dan@4downdistribution.com
Registered office : 4Down Distribution Ltd . Unit 6, North Ridge Business Park, Haywood Way, Hastings, East Sussex, TN35 4PP
Company registered in England with no : 5728527

COMPANY INFORMATION

COMPANY NAME	<input type="text"/>		
CONTACT NAME (BMX)	<input type="text"/>		
TRADING ADDRESS	<input type="text"/>		
TOWN/COUNTY	<input type="text"/>	POST CODE	<input type="text"/>
TELEPHONE	<input type="text"/>		
FAX	<input type="text"/>		
E-MAIL	<input type="text"/>		
WEBSITE	<input type="text"/>		
SHOP OPENING HOURS	<input type="text"/>		
TICK HERE IF YOU WANT THESE DETAILS ON OUR WEBSITE	<input type="checkbox"/>	<input type="text"/>	
ENTER GENERAL CONTACT E-MAIL FOR OUR WEBSITE HERE	<input type="text"/>		
ENTER GENERAL CONTACT PHONE NO FOR OUR WEBSITE HERE	<input type="text"/>		

PLEASE SUPPLY A PHOTO ATTACHED TO THIS ACCOUNT FORM OF YOUR STORE FRONT, OR E-MAIL US LINKS TO SEE PHOTOS OF THE STORE ONLINE.
WITHOUT PROOF OF THIS THIS WE WILL BE UNABLE TO OPEN ANY ACCOUNTS - ***WE DO NOT DEAL WITH ONLINE STORES ONLY***

OWNER INFORMATION

COMPANY OWNER	<input type="text"/>		
SHOP MANAGER	<input type="text"/>		
COMPANY TYPE (PLEASE CIRCLE)	SOLE TRADER	PARTNERSHIP	LTD COMPANY
LTD CO COMPANY REG NO	<input type="text"/>		
VAT REGISTRATION NO	<input type="text"/>		
SOLE TRADER/PARTNERSHIP	<input type="text"/>		
HOME ADDRESS	<input type="text"/>		
	<input type="text"/>	POST CODE	<input type="text"/>
TELEPHONE	<input type="text"/>		
HOME ADDRESS 2	<input type="text"/>		
	<input type="text"/>	POST CODE	<input type="text"/>
TELEPHONE 2	<input type="text"/>		
YEARS TRADING (MONTH/YEAR)	<input type="text"/>		

BANKING DETAILS

ACCOUNT PERSON(S)

TELEPHONE (EXT)

ACCOUNTS AVAILABLE (DAYS/TIMES)

BANK NAME

BRANCH

ACCOUNT NUMBER

SORT CODE

ACCOUNT NAME

TRADE REFERENCES

PLEASE NOTE: ALL ACCOUNTS ARE PRO-FORMA UNTIL TRADE REFERENCES HAVE BEEN APPROVED

REFERENCE NO 1

COMPANY NAME

ADDRESS

TEL NO

FAX:

CONTACT NAME

REFERENCE NO 2

COMPANY NAME

ADDRESS

TEL NO

FAX:

CONTACT NAME

CREDIT APPLICATION TERMS AND CONDITIONS

It is understood that by signing this application form for an account on behalf of a limited company, the undersigned person(s) place the company liable for all outstanding unpaid debts and any cost and/or interest incurred on said debt owing to 4down distribution Ltd, should the account become overdue or delinquent.

It is understood that by signing this application form for an account, the undersigned person or partners are jointly/severally personally liable to all outstanding unpaid debts and any cost and/or interest incurred on said debt owing to 4down distribution Ltd should the account become overdue or delinquent.

It is further understood that 4down distribution Ltd require payment to be met within 30 days from the invoice date unless otherwise agreed.

All goods invoiced by 4down distribution Ltd remain the property of 4down distribution Ltd until all invoices are paid in full. All delivery queries must be made within 2 days of delivery, and followed up in writing within 4 days of delivery.

I/We the undersigned certify that we fully understand your credit terms and agree to proper payment in consideration of credit extended.

By signing this application form for an account, the undersigned person acknowledges that they have read and agreed to 4Down's Terms of Trading.

I confirm that all the details on this form are correct. ***I SIGNATURE MUST BE A DIRECTOR IF SIGNING ON BEHALF OF A LTD COMPANY***

SIGNED BY

SIGNED BY

POSITION

POSITION

SIGNATURE

SIGNATURE

DATE

DATE