

APPLICATION FOR CREDIT ACCOUNT								
PLEASE SUPPLY A SAMPLE COPY OF YOUR COMPANY LETTER HEAD								
Company Name:								
Trading Address:								
Landline Telephone Number:	Email Address for Electronic Invoicing:							
Invoice and Statement Address:								
V.A.T Number:								
Company Registration No:	Date of Incorporation:							
Hire Contact:	Accounts Contact:							
Hire Email Address:	Accounts Email Address:							
Type of Business:	Website:							
References Please supply names and addresses of two current suppliers to whom we may apply for a trade reference (NOT INCLUDING OTHER HIRE COMPANIES)								
1:	Name of Contact:							
	Telephone:	Email:						
2:	Name of Contact:							
	Telephone:	Email:						



Hired-In Plant Insurance PLEASE PROVIDE AN UP TO DATE COPY OF YOUR HIRED-IN-PLANT INSURANCE								
Insurance Company	<i>y</i> :			Policy No:				
Telephone Number	:			Name of Contac	t:			
Insurance Valid fro	m Date:			Insurance Expiry Date:				
We offer a Loss Damage Waiver for an additional 15% of Hire Please TICK the box if you require the Waiver								
Registered Dealer of Controlled Oils								
	our business is a	Registered Dealer of	Controlled Oils:	Yes		No		
If Yes, Please provide your RDCO Approval Number:								
Te	Terms & Conditions Attached			GDPR Information Attached				
Our Payment Terms are 30 DAYS END OF MONTH Please TICK to confirm these will be adhered to								
I/We confirm I/we have read and will be bound by the above companies' Terms & Conditions I/We have received a copy of John F Hunts Data Protection Policy of which I have read and understand								
Signed:	- Director, Company Secretary or Authorised Personnel							
Print Name:								
Date:								
OFFICE USE ONLY								
Account Number:			Salespers	Salesperson: CC - Credit Control				
Account Approved By:			Date Ope	Date Opened:				
Source of Contact (Please tick accordingly)								
	Cold Call	Existing Client	Glenigan	Hire Desk	Web Enquiry	Other –		

Website