ACCOUNT APPLICATION

PLEASE COMPLETE ALL RELEVANT INFORMATION

Billing Information - Invoices will be addressed to and emailed to the following details

Company/Client Name: ....

Billing Address: ....

.... Postcode: ....

Billing Email: .... Phone: ....

Company Directors Name(s): ....

Company Registration #: ....VAT Registration #: ....

Company Directors Email: ....

Account Contact – information for the main point of contact for accounts enquires - if required

Name: .... Accounts Email:...

Address (if different to above): ....

.... Postcode: ....

Accounts Phone: ....

Delivery Information – if required

Contact: .... Mobile Phone:...

Email Address: ....

Address (if different to Billing address): ....

.... Postcode: ....

Specific delivery instructions (stair access, lift dimensions, loading bays/booking ahead/reception desk open-close times etc.)

…….

Please note that changes to the any of the above information must be supplied to GAS for accurate billing and deliveries .

Account Type

Please indicate, with an 'X', below whether you would prefer a Credit (30 day Credit Terms) or Cash (Pay-As-You-Go) account. Credit account applications are subject to Credit Check from our accounts department.

All first time hires require payment in full prior to confirmation and delivery.

Payment must be received no later than 3pm the day before the commencement of the rental period.

30 DAY TERMS: …..
(Credit accounts that are inactive for over 6 months will be subject to review of their credit status)

CASH TERMS: …..
If you personally will be paying for bookings and the invoices will be made out to you then please supply 2 Trade References below. Trade references can be other hire companies, studios, agencies, production companies or production staff/photography professionals. Please also supply 1 photo ID (Driving Licence/Passport) and 2 current proofs of address.

1) TRADE REFERENCE Company Name, Address, Postcode: ....

…….

Email: .... Phone:…………………………………………

2) TRADE REFERENCE Company Name, Address, Postcode: ....

…….

Email: .... Phone:…………………………………………

Please sign and complete the information below. By doing so you are agreeing to the Terms and Conditions detailed underneath.

Name + position of signatory: ……..

Signed: …………………………………………………………………………… Date: ……………………………………………