

**UPSTREAM SEAFOODS LTD**

**CREDIT APPLICATION FORM**

Full Trading Names Of Applicant: \_\_\_\_\_

Trading Address: \_\_\_\_\_

\_\_\_\_\_

Post Code: \_\_\_\_\_ Telephone No: \_\_\_\_\_

**IF LIMITED COMPANY OR PUBLIC LIMITED COMPANY**

Address of Registered Office: \_\_\_\_\_

\_\_\_\_\_

Registration Number: \_\_\_\_\_

If Partnership, please give full names & private addresses of all Partners.

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

Year of Commencement: \_\_\_\_\_

Home Address: \_\_\_\_\_

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Postcode: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Your Bankers Name Address & Telephone No: \_\_\_\_\_

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Account No: \_\_\_\_\_ Sort Code: \_\_\_\_\_

### **REFERENCES**

**Name, Address & Telephone No of two Principal Suppliers:**

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Telephone No: \_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Telephone No: \_\_\_\_\_

**Please State Maximum Credit Requirement: £ \_\_\_\_\_**

**Name of Managing Director / Partner: \_\_\_\_\_**

**Name of Person responsible for payment of Account**

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**PLEASE NOTE OUR CREDIT TERMS, UNLESS AGREED ELSEWHERE,  
ARE STRICTLY 30 DAYS.**

**DECLARATION BY CREDIT APPLICANT**

**We hereby request you to open a Credit Account.**

**DIRECTORS / PARTNERS DECLARATION**

**I/We, being an Authorised Officer of this Business, do agree that payment of all Accounts will be received by you (Our Supplier) within your stated Credit Terms of 30 days & that all goods remain the property of Upstream Seafoods Limited until payment has been made to us in full.**

**I/We appreciate that adherence to this obligation is the essence of the Contract between us.**

**Signed: \_\_\_\_\_ Date: \_\_\_\_\_**

**Name, please print: \_\_\_\_\_**