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## BATEMAN SKIPS CREDIT APPLICATION FORM

### BUSINESS CONTACT INFORMATION

Company name:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:		Postcode:	
Company registration number:			
Company VAT number:			
Date business commenced:			
What type of business are you?			
Sole Trader	Partnership	Public	Private

### BUSINESS AND CREDIT INFORMATION

Account contact name:		Purchase order number required: Y / N	
Primary business address:			
City:		Postcode:	
Telephone:	Fax:	E-mail:	
Credit amount requested:		Accounts e-mail:	
Bank name:			
Bank address:		Phone:	
City:		Postcode:	
Name on account:			
Bank account number:			
Sort code:		Credit amount required:	

### TRADER REFERENCES

Trade reference 1 (Required)	Trade reference 2
Contact name:	Contact name:
Company name:	Company name:
Primary address:	Primary address:
City:	City:
Postcode:	Postcode:
Email:	Email:
Phone:	Phone:

### AGREEMENT

1. All invoices are to be paid 30 days from month end.
  2. Queries arising from invoices must be made within seven working days.
  3. By submitting this application, you authorize Batemans Skips Limited to make a credit check as necessary.
- By signing this document, you agree to our terms and conditions. For full terms and conditions please go to [batemanskips.co.uk/terms](http://batemanskips.co.uk/terms)

Title:	
Position:	
Date:	

**Broadmead Lane Industrial Estate, Broadmead Lane, Keynsham, Bristol, BS31 1ST**  
**T: 0117 986 5275 | E: [info@batemanskips.co.uk](mailto:info@batemanskips.co.uk)**  
**Company Registration Number: 4934307**  
**VAT Registration Number: 741517740**  
**Bateman Skips Credit Application Form V2.0 (29.01.2018)**