

CBP ACCOUNT APPLICATION FORM

(PLEASE COMPLETE IN BLOCK CAPITALS)

COMPANY NAME:

TRADING AS (if applicable):

REGISTERED OFFICE ADDRESS:

POST CODE:

TELEPHONE NO:

FAX NO:

EMAIL ADDRESS:

COMPANY REG NO:

COMPANY VAT NO:

INVOICE ADDRESS (if different):

POST CODE:

TELEPHONE NO:

FAX NO:

EMAIL ADDRESS:

DELIVERY ADDRESS (if different):

POST CODE:

TELEPHONE NO:

FAX NO:

EMAIL ADDRESS:

Coventry Building Products

ARE YOU A MEMBER OF A BUYING SOCIETY? YES NO

IF YES, WHICH BUYING SOCIETY? CUSTOMER CODE: I WISH

TO BE INVOICED THROUGH MY BUYING SOCIETY? YES NO

REQUESTED CREDIT LIMIT:

DIRECTOR(S) NAME:

DIRECTOR(S) ADDRESS:

POST CODE:

MOBILE NO:

EMAIL ADDRESS:

COMPANY CONTACTS:

BUYER:

DIRECT TELEPHONE NO:

DIRECT FAX NO:

EMAIL ADDRESS:

ACCOUNTS :

DIRECT TELEPHONE NO:

DIRECT FAX NO:

EMAIL ADDRESS:

Coventry Building Products

TRADE REFERENCE 1:

COMPANY NAME:

COMPANY ADDRESS:

POST CODE:

CONTACT NAME:

CONTACT NO:

TRADE REFERENCE 2:

COMPANY NAME:

COMPANY ADDRESS:

POST CODE:

CONTACT NAME:

CONTACT NO:

BANK DETAILS:

BANKERS NAME:

BANKERS ADDRESS:

POST CODE:

SORT CODE:

A/C NO:

WE AGREE TO YOUR TRADING TERMS & CONDITIONS AND THAT THE ABOVE PARTICULARS ARE CORRECT

SIGN:

PRINT:

POSITION:

DATED:

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