|  |
| --- |
| **Full Trading Name:**  |
| Limited/Partnership/Sole Trader (please circle one) |
| Registered Address: |
|  |
| Postcode: |
| Invoicing Address (if different from above): |
|  |
| Postcode: Fax: |
| Tel: Website:  |
| E-Mail: |
| VAT No: |
| Credit Amount Required:  |

|  |
| --- |
| Managing Director’s Name (s): |
|  |
|  |
| Nature of Business: |
|  |
| **Company Registration Number:** |
| Date Business Established: |
| Payments Contact: Tel: |
| Accounts Email:  |
| Address for Invoices: |
|  |

**Application for Credit Facilities**

|  |
| --- |
| Bank Reference: |
| Bank Name: |
| Address: |
|  |
| Postcode |
| Account No: |
| Sort code: |

|  |  |
| --- | --- |
| **Trade Ref No.1** | **Trade Ref No.2** |
| Name: | Name: |
| Address: | Address: |
|  |  |
| Postcode: | Postcode: |
| Tel No: | Tel No: |
| Contact: | Contact |

|  |
| --- |
| **Do you have an insurance policy covering hire plant?**If yes, please attach a copy of the insurance cover note. |
| Please provide details of the insurance cover held: |
| Employers Liability: | Limit of Indemnity: | Expiry Date: |
| Public/Products Liability: | Limit of indemnity: | Expiry Date: |

|  |
| --- |
| I hereby apply for Credit Facilities with MVIS Ltd. I Confirm that this information is true and complete and I have the authority to open this account. I agree to be bound by MVIS Ltd Terms and Conditions, which together with this information form part of the agreement. **Signed:** |
| **Print Name:** |
| **Position:** |
| **Date:** |

 Please return to:

MVIS Ltd

Units 6-8 Brookfield Way

Tansley

Matlock

Derbyshire

DE4 5ND

E-Mail: accounts@m-vis.co.uk

Tel: 01629 580570