



## CREDIT APPLICATION FORM

ONLINE

<b>NEW ACCOUNT NUMBER</b>

### Finance Details

<b>ACCOUNT NAME</b>	
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#### FULL REGISTERED ADDRESS

	POSTCODE

#### COMPANY INFORMATION

COMPANY REGISTRATION NO.			
NATURE OF BUSINESS			
NO. OF STAFF		YEARS TRADING	

#### CONTACT DETAILS

NAME	
TELEPHONE NO.	
FAX NO.	
E-MAIL	

#### ACCOUNTS DEPARTMENT CONTACT DETAILS

NAME	
TELEPHONE NO.	
FAX NO.	
E-MAIL	

#### CREDIT REFERENCE 1

NAME & ADDRESS			
	POSTCODE		
TELEPHONE NO.			
E-MAIL ADDRESS			

#### CREDIT REFERENCE 2

NAME & ADDRESS			
	POSTCODE		
TELEPHONE NO.			
E-MAIL ADDRESS			

#### METHODS OF PAYMENT

DIRECT DEBIT *	YES / NO
BACS **	YES / NO
CHEQUE	YES / NO
CREDIT CARD	YES / NO

#### BILLING REQUIREMENTS – PLEASE TICK

FORTNIGHTLY		MONTHLY	
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#### PEOPLE AUTHORISED TO BOOK

TICK FOR ONLINE BOOKING & REPORTING	
Have you previously had an account with us?	YES / NO
Do you have any other accounts with Premier Taxi?	YES / NO
If YES, what is your account number?	
Is a reference required with each booking?	YES / NO
If YES, please list? E.g. security code, purchase order number etc	

#### CUSTOMER DETAILS

**NAME**

**POSITION**

I accept that your terms are 30 days net and hereby apply for a credit account. I accept your terms and conditions of trading are as published by the RHA (Road Haulage Association) and that the tariffs supplied to me have been calculated by the Premier Taxi computer grid and are zoned. The mileages between these zones may at times differ from those published by some Automobile organizations. I agree to abide by them in full. I confirm that I am authorized to make this application.

<b>SIGNATURE</b>		<b>DATE</b>	
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\* Information will be e-mailed on account activation  
 \*\* Our Bank Details are available upon request  
 Please call back to 01908 444 444