

**NEW ACCOUNT NUMBER****CREDIT APPLICATION FORM****ONLINE****Finance Details****ACCOUNT NAME****FULL REGISTERED ADDRESS**

POSTCODE

**CONTACT DETAILS**

NAME

TELEPHONE NO.

FAX NO.

E-MAIL

**COMPANY INFORMATION**

COMPANY REGISTRATION NO.

NATURE OF BUSINESS

NO. OF STAFF

YEARS TRADING

**ACCOUNTS DEPARTMENT CONTACT DETAILS**

NAME

TELEPHONE NO.

FAX NO.

E-MAIL

**CREDIT REFERENCE 1**

NAME &amp; ADDRESS

POSTCODE

TELEPHONE NO.

E-MAIL ADDRESS

**CREDIT REFERENCE 2**

NAME &amp; 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

**PEOPLE AUTHORISED TO BOOK****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 Cab 365 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.

SIGNATURE

DATE

TICK FOR ONLINE BOOKING &amp; REPORTING

Have you previously had an account with us?

YES / NO

Do you have any other accounts with Cab 365?

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

\* Information will be e-mailed on account activation

\*\* Our Bank Details are available upon request

Please call back to +44 1908 53 53 53