

Please complete all sections in BLOCK CAPITALS and return to WEC Group Limited with a copy of your letter heading

Company Details

Customer Name Company Reg. No

Trading Name (if different)

Address

..... Post Code

Tel No. Fax No

Registered Office (if different from above)

Post Code VAT No

Tel No. Fax

Type of Company (circle as appropriate)

Public Limited Company Limited Company Partnership Sole Trader

Parent Company Name

Name & Address of Directors / Partners / Sole Traders

1)

..... Post Code

2)

..... Post Code

3)

..... Post Code

Number of years trading Credit limit required (£ per month)

Approx annual turnover Total No. of staff

Number of outlets (please supply details under separate cover)

Do you require to give official order numbers? Yes / No Confirmed in writing? Yes / No

Contact name & telephone no. of person in charge of accounts payable

Bank Details

Banker Branch

Sort Code Account No

Account Name Bank Tel No

Trade References

Name	Name
Address	Address
Post Code	Post Code
Tel No	Tel No
Contact	Contact

I/We have read your conditions of sale as set out and agree that they supercede any terms/conditions confirmed in our purchase order.

Signed (Authorised signatory)	Signed (Authorised signatory)	
Print Name & Title	Print Name & Title	
Date	Date	
Account Approval	Credit Limit	Account Number

Thank you for completing this form - we will process it as quickly as we can, and look forward to your valued orders in the near future