

**APPLICATION FOR COMMERCIAL CREDIT**



**Please complete and return to:**  
Able Waste Management Ltd  
Hallen Industrial Estate  
Severn Road  
Bristol BS10 7SE  
Fax: 0117 938 1585  
email: sales@ablewaste.co.uk

Full Trading name .....

Trading Address .....

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Telephone No. .... Fax No .....

E.Mail address (for invoices) .....

Registered Office (if different to above) .....

Business Type: Limited Company  Sole Trader  Partnership

Year trading commenced ..... Company Reg # .....

If Partnership please give full names and home address of ALL partners

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**References**

Name ..... Monthly purchases.....

Address .....

.....

Telephone Number ..... Contact .....

Name ..... Monthly purchases.....

Address .....

.....

Telephone Number ..... Contact .....

Name of Bankers..... Branch .....

Sort Code ..... Account Number .....

Anticipated credit required £.....

Accounts payable contact ..... Tel No: .....

Registered office: Able Waste Management Limited, Wiltshire House, County Park Business Centre,  
Shrivenham Road, Swindon SN1 2NR  
Registered in England and Wales 04231439

**DECLARATION BY APPLICANT**

I am duly authorised by the applicant business to enter into this agreement on it's behalf. We agree that payment of invoices will be made strictly in accordance with the terms stated thereon (all invoices due 30 days). We recognise that if payment of your invoices is not made by the due date it may result in the matter being referred to the CPA for recovery, we agree to indemnify you against any costs incurred by yourself.

I understand that you will conduct a search through credit reference agency, and will keep a record of that search, and may share information with other businesses

I authorise our bankers to provide an opinion as to our sustainability for the requested account.

Signed..... Name.....

Date..... Position.....