

Customer Credit Account Application

Please complete all fields below.

owans	Organisation Type:	Sole Trader []	Partnership []	Company []	
Companies only: Compa	any Name:	Registered Number:			
Registered Address:					
All Applicants: Trading	Name:		_ VAT Reg. No		
Invoice Address:					
Telephone Number:	Fax No:		Web Address:		
Accounts Contact:	Accounts Email:				
Type of Business:	Length of Time Established:				
Trade References					
i)		Telephone No			
ii)	Telephone No				
Bankers;			Account Number:		
		Sort C	Code:		
Credit Amount Request	ed (Per Month):		-		
we hereby note and accept	the conditions as shown on yoplied until all monies outstand	our invoices relating t	o the granting of cred	and accurate. In applying for credit facilities it, terms of payment and retention of title /or any sale contract have been received by	
Payment is due 30 days fro	m date invoice. Any queries o	r disputes are to be m	ade in writing within	7 days of receipts of the invoice.	
purpose of carrying out you consult with and disclose business that you have nor	ith personal data ("data"), I/vour business and associated the data to credit reference	activities ("activities") agencies, banks, cr that such third parties	In considering my, edit insurers and ot s may process the da	ecurely in confidence and processed for the /our application, I/we accept that you may her responsible organisations outside your ta. I/We understand that under the Act I/we ble fee.	
Requested By:		Signa	ture:		
Director/Secretary/Princi	oal:	Date:			

Please return by fax to +353 (0) 1 4106767 or scan & email accounts@mcgowansprint.com

Issued by M&J McGowans Ltd, Unit 3 IDA Industrial Estate, Poppintree, Dublin 11, Ireland Unit A1, 17 Heron Rd, Belfast, BT3 9LE Co. Reg. No. 141718: Revision 31/10/07