

CREDIT ACCOUNT APPLICATION

Tel: 0845 548 5500

Email: info@mcgrathgroup.co.uk

www.mcgrathgroup.co.uk

McGRATH

YOUR BUSINESS

Company Name
Trading Address.....
..... Postcode.....
Tel..... Mobile.....
.....
Registered Office (if different from above)
.....
..... Postcode.....
Invoice Name/Address (if different from above)
.....
..... Postcode.....
Email address for invoices:
Sales invoices will be received by email from invoices@mcgrathgroup.co.uk

Company Registration Number.....
Company VAT Number.....
Date Established.....
Accounts
Contact..... Tel.....
Accounts Email.....
Procurement
Contact..... Tel.....
Business Type - Plc/Limited Company/Partnership/Sole Trader
Credit Limit Required.....

Due to Waste Regulations please ensure the following is completed, this application will not be processed if left blank.

Nature of Business.....
SIC Code (2007) This can be obtained from Companies House records.

BANK DETAILS

Bank Name.....
Address.....
..... Postcode.....
Account Number..... Sort Code.....

We will make a search with a credit reference agency, which may record and share that information with other businesses. We will also monitor and record information relating to your trade performance and such records will be made available to credit reference agencies who will share that information with other businesses in assessing applications for credit and fraud prevention. We may also make this available to other organisations to assess applications for credit.

PAYMENT DETAILS

If this credit application is successful, do you require Purchase Order Numbers to be shown on invoices? **YES/NO** (delete as appropriate).

Please note that if this question is not answered we will not accept responsibility for providing order numbers retrospectively.

Payments are to be made by BACS to the account shown on the invoices and statements. To ensure correct allocation please send remittances to info@mcgrathgroup.co.uk. Payment by credit/debit card - Please contact Credit Control department on 0845 548 5500 Option 3.

We monitor account balances and credit limits regularly and may ask for additional payments at any time if the credit limit is exceeded, regardless of the date of the invoices.

DECLARATION

I/We make this application to open a credit account with The McGrath Group. I/We understand the credit terms are that payment is due strictly 30 days from the invoice date and that if granted credit I/We agree to pay in accordance with these terms.

I/We understand and accept that the McGrath Group reserve the right to suspend services and insist on payment of all outstanding money where accounts are overdue.

The McGrath Group recognises that by signing this document, you agree to The McGrath Group Terms & Conditions, Conditions of Hire, Site Rules and comply to our Health & Safety Presentation which will be required to be seen by all members of your organisation visiting our MRF.

Signed.....

Printed Name.....

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

When returning this form please supply copies of your Company's letter headed paper. If tipping waste, please also supply a copy of your Company's Waste Carriers Licence Please ensure ALL sections of this form are completed and emailed to info@mcgrathgroup.co.uk Applications will be delayed if the requested documents are not received.

TRADE REFERENCES

Please provide details of two Trade References

Contact.....
Company.....
Tel.....
Email.....

Contact.....
Company.....
Tel.....
Email.....

SERVICES

What services are you interested in using this account for?

- Skips or Roll On/off
 MRF/Transfer Station
 Recycled Aggregates or Products

Would you be interested in receiving a quote for any of the other services listed? **YES/NO** (delete as appropriate)

Will you be using your own transport? **YES/NO** (delete as appropriate), If No, what Haulier will you use?

Prior to using McGraths what company/companies did you use?

OFFICE USE ONLY

Date application received.....

Top Service credit limit recommendation

Credit limit..... Account Number.....

Special credit terms: **YES/NO, if yes please specify:**

Name of McGrath contact.....

Account processed by..... Date.....

Directors Name

Directors Signature.....

Date Signed.....

Comments.....