



ACCOUNT APPLICATION FORM

Simply complete this form and fax or post it back to us.

Full Business Trading Name _____

Nature of Business _____

Business Address _____ Accounts Address if Different _____

Telephone _____ Fax _____

E-mail _____

Buying Contact _____ Accounts Contact _____

Ltd Co/Partnership/Sole Trader (delete as applicable) _____

Registered Address if Ltd Co. if different from trading address _____

Company Registration No. _____

How long registered or in business (partnership) _____

Name of directors or partners _____

Bankers _____

Address of Bank _____

Sort Code _____ Acc. No. _____

Please provide names of two current suppliers who we can approach for trade references

Name _____ Name _____

Address _____ Address _____

Tel _____ Tel _____

Fax _____ Fax _____

Credit required per month _____

Until credit account has been approved terms are pro-forma and settlement before dispatch, and once credit account has been approved terms are strictly 30 days following month end of invoice. Signing below deems agreement with these terms.

Signature agreeing to these terms

Signature of behalf of NFP Ltd

Date _____

Date _____

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