



## Credit Application Form

Please complete in **BLOCK CAPITALS**. Once completed, please email to [accounts@zoeplanthire.co.uk](mailto:accounts@zoeplanthire.co.uk)

Type of Business: Please Delete as Appropriate...

Limited Company/Partnership/Sole Trader/Other (please specify) .....

Company Name:	
Registered Company Address:	Invoice Address: (If different)
Postcode:	Postcode:

Telephone No		A/C's Email	
Mobile No		A/C's Telephone No	
Email		A/C's Contact Name	
Website		VAT Number	

Company Reg No		Bank Name	
Date Established		Account Name	
Nature of Business		Sort Code	
Credit Limit Required	£	Account Number	

Please provide TWO Trade References:	
Company Name:	Company Name:
Address:	Address:
Postcode:	Postcode:
Telephone Number:	Telephone Number:
Email:	Email:
Account Number:	Account Number:

Additional information required (if applicable)	Tick if Attached
Copy of your Hired in Plant insurance policy (£100,000 single item cover for larger machines (MUST INCLUDE CONTACT INFORMATION))	
Limited Companies, please provide a copy of Letter Head	
Non-Limited Companies & Sole Trader, please supply photo ID of Business Owner	
Sole Traders, please supply copy of utility bill dated within the last 3months	

**This form must be signed by the company Director/Owner:**

I have read and agree to be bound by the CPA model conditions of hire as found on [www.zoeplanthire.co.uk](http://www.zoeplanthire.co.uk). I give consent to a credit search being made on me/us as Owner; Partner(s) or Director(s) of the organisation both now and at any future date. I understand that this search will be recorded by the credit agency and may be disclosed to subsequent enquirers.

Signed:	Date:
Name:	Title:

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**Internal Use:**

Account Number		Credit Agency Limit	£
Authorised By		Credit Agency Score	