

Account/Credit Application Form

	Thank you for choosing TransX	port Limited	ed, please complete and return the following
		accounts@t	transxport.co.uk
Compan	y Name:		
Compan	y Address:		
Compan	y Reg:	Сс	Company VAT:
Tel:			
Transpo	rt Contact & Email		
Account	s Contact & Email		
		Term	ms
=			e event of proceedings to recover debt TransXport Limited narge interest under the current Late Payment of Commercia
		Debts (Inter	erest) Act.
I hereby a	gree to the above terms		
Signed		Print Name	ne
Position		Date	
Bank Nam	e & Address		
	Sort Code:		
We give be	elow 2 Trade Referees, who are not	tassociated	d with us.
Name:		Name:	
Address	:	Address:	
Tel:		Tel:	
Contact:		Contact	
Fmail		Fmail	

I give consent for the Trade Referees and Bankers above to be approached either verbally or in writing for the purpose of obtaining trade references.

In signing this you understand that your company may be subject to a credit check.