

Application for a cash account

Please complete this form in block capitals

Office	Introducer (Block Capitals)
use only	
Office	

About you and your business

Compai	ny name						
Trading name (if ap	plicable)						
Date Est	ablished	/	/				
Full postal address			Address 1				
. a.i. postar adar ess			Address 2				
			Address 3				
			City				
			County				
			Postcode				
Te	lephone						
	Mobile						
	Email						
Are	e you a	☐ Limited	Company	☐ Sole Trade	r		Partnership
			Registered name				
				Registration no.			
If Limited Company, please provide the following details:			Address of registered office				
Do you have any other accounts with us?			5				
If yes please include name of account or account no.				Yes 🗖	No 🗖	A/c	name:
Your Contac	t Info	rmation					
Contact 1: Name	Contact 1: Name				Contact 2: Name		
Home address							
					Home add		
Postcode	tcode				Postcode		
Home telephone					Home telephone		
Mobile					Mo	obile	

Accounts: 0117 906 3078 Fax: **0117 906 3079** creditcontrol@bristol-tile.co.uk www.bristol-tile.co.uk

Registered Office: Olympus House, Britannia Road, Patchway, Bristol, BS34 5TA Registered in England No: 7690345 VAT No: 118 1221 55



Your needs Please complete to help us understand your business requirements

Does your business require order		s or job references? f yes please specify.	Yes 🗖	No		Order no/Ref n	0:				
Number of employee	S										
The main Kellaway branch you intend to trade with	?										
Estimated monthly spend on materials generall	y £		•								
How you heard of us											
Newspaper/magazine adve	rtising					Social media					
Referral/recommen	dation					Email					
Google/search	engine		Leaflet								
Event/trade	show		Billboard								
Business category											
Bathroom Installer		Building Cont	ractor (Dom	estic)		Building	Contractor (Commercial)				
Kitchen Installer			Charities			Decorator					
Plumbing Engineer		General Trad	des (e.g. Labourers			Groundworker/Civil Engineer					
Heating Engineer		Self-Bu	uilder/Homeowner			Loft Conversion					
General Maintenance			Floor Screeder			Plaster/Dry Liner					
Mechanical/Electrical	nical/Electrical						Roofer				
Home Branch	Home Branch					Representative					
Trading terms and condition	S Please	read in full									
By signing this application form you accept our trading	g terms a	nd conditions as prov	ided with th	is documen	nt.						
You will automatically receive invoices and statement these items to you (please check with us for current re		l. If you wish to opt o	out from rec	eiving these	electr	onically, a small cha	arge will be made for post	ing			
If you would like to receive e-marketing updates, plea never share your details with any other company or the			vents 🗖, Ex	clusive disco	ounts 🛭	, Product informat	tion □. Please note that w	ve will			
Your account cannot be opened unless you have attack	hed to th	is application a:									
Copy of recent utility bill as proof of trading addres	s (gas, ele	ectricity, landline tele	phone bill e	tc) 🗖							
2. A member of staff has verified your address (e.g. ag											
Kellaway Staff Member											
Please check form is completed in full to avoid dela	y in proc	essing, then sign belo	w and retur	n.							
Signed	1				Position in business						
Print name			Date								
						•					
Office Use Credit Limit		Date Opened		Account Cod	de	Authorise	ed				

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