

Account Application Form



Company Name

--

Phone Number

--

Address 1

--

Address 2

--

Address 3

--

Postcode

--

Telephone Number

--

Fax Number

--

Company Reg No

--

Company VAT Number

--

Contact Name

--

Contact Email

--

Account Application Form



Billing Address (if different from above)

--

Trade Reference

Company Name

--

Contact Name

--

Address 1

--

Address 2

--

Address 3

--

Postcode

--

Telephone Number

--

Email

--

Account Application Form



I hereby authorise Chiltern Couriers Ltd to obtain references from the, as and when appropriate. I agree to adhere to the terms and conditions as set out by Chiltern Couriers Ltd and the Road Haulage Association. I agree that all invoices are subject to 30 days end of month payment terms from the date the invoice is produced.

I declare I have authority to apply for a credit limit of £..... on behalf of the company for which I am applying.

SIGN.....

PRINT.....

DATE.....

POSITION.....

Please complete all pages and return via email to info@chilterncouriers.com

Alternatively, complete and return by post to :

Chiltern Couriers Ltd, 18 Leathwaite Close, Luton, Bedfordshire, LU3 2TG