



# Application for Credit Account

QBS Software Ltd | 7 Wharfside, Rosemont Road, Wembley, HA0 4QB  
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Please complete ALL boxes IN FULL and fax back to the Accounts Department on +44 (0)20 8902 7600.  
Failure to complete all the boxes on this form may delay your account being opened.

Full Company Name

Full Company Invoice Address

Phone  Fax  Email

Registered Office

Registered No  Vat No

## About Your Company

Nature of Business  Annual Turnover

Date Commenced Trading  Required Credit Limit

Directors Name(s)

Accounts Payable Contact  Email

Purchase Dept. Contact  Email

Email address to send Invoices & Statements

## Banking Details

Bank Name  Account Number

Address

Sort Code

Trade Reference Name  Tel:

Address

I/We declare the above information to be correct and agree to your standard terms of trade (see website). Further, should a credit facility be granted, I/we agree to payment being made 30 days from the date of the invoice. I am authorised by the above company to sign this application.

Name  Signature

Date  Position

Conditions of Credit: All Invoices are net plus carriage & VAT charged at the appropriate rate. Title of goods does not pass until payment is received in full. Claims for damaged goods must be notified in writing within 72 hours.

Additional copies of this credit application form available here: <http://www.qbssoftware.com/forms/creditapp.pdf>