

Credit Application For A 30 Day Account

Please complete this form and fax it back to +44 (0) 1937 840421

Your Details

Your Account Manager: _____
 Company Name: _____
 Company Reg. No: _____ Vat No: _____
 Contact Person: _____
 Address: _____

 Telephone Number: _____ Fax Number: _____
 Email: _____

Credit Limit Required: £ _____ Estimate Per Month: £ _____

Bank Details

Bankers: _____
 Address: _____
 Sort Code: _____ Account No: _____

References

Trade Ref 1: _____ Contact: _____
 Address: _____
 Telephone Number: _____ Fax: _____

Trade Ref 2: _____ Contact: _____
 Address: _____
 Telephone Number: _____ Fax: _____

Agreement

I have read and agree to abide by ICC Sales Terms & Conditions

Signature: _____ Date: _____

Print Name: _____

Thank You For Your Time

IBM



COMPAQ



digital



INTERNATIONAL COMPUTER CONNECTIONS

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