

New Customer Account Application Form

Full Company Name			
Co. Registration No.		VAT Reg. No.	
Parent Company/Group Name			
Main trading office *			
Registered office (if different)			
Nature of business			
How long established **		No. of staff	
Main Tel No.		Main Fax No.	
Finance Contact Name/Title			
Purchaser Contact Name/Title			
Expected purchase volume		Credit limit sought	
Bank			
Branch Address			
Account Name			
Sort Code		Account No.	
Trade Reference 1 - Name			
Address			
Tel No.		Fax No.	
Trade Reference 2 - Name			
Address			
Tel No.		Fax No.	

* If based outside the Rep. of Ireland please enclose a copy of your published account.

**If less than 18 months please notify your account manager as further information may be required.

Please open a trade credit account in the above applicant's name. We undertake to honour Network Architect's payment terms of 30 days from delivery, and understand that credit facilities may be suspended or revoked in the event of late payment, and adhere to the terms and conditions of supply. I confirm I am authorised to make this application and enter these commitments.

Signed :

Date :

Name:

Position: