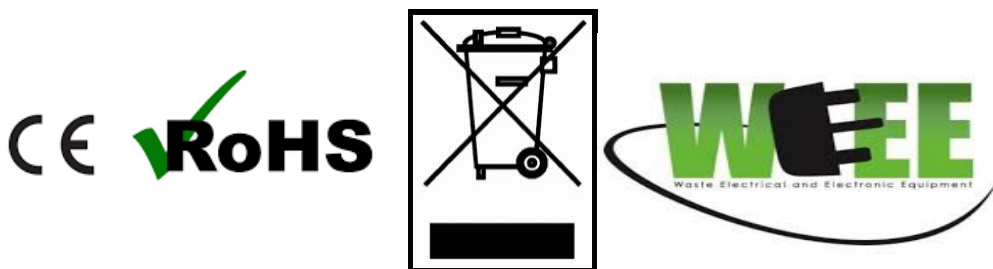




Account Application Form



APPLICATION FOR CREDIT ACCOUNT WITH SIGNATURE LED LIGHTING LTD

Signature LED Lighting LTD, Unit 2, 34a Kershaw Street, Widnes, Cheshire, WA8 7JA, 0151 420 6000

LIMITED COMPANY NAME		COMPANY OR TRADING NAME (IF DIFFERENT)	
WEBSITE			
TRADING ADDRESS			
COMPANY REGISTRATION NUMBER		YEARS TRADING	
TELEPHONE NUMBER		FAX NUMBER	
ACCOUNTS CONTACT		ACCOUNTS EMAIL	
PURCHASERS CONTACT		PURCHASERS EMAIL	
MANAGERS CONTACT		MANAGERS EMAIL	
ALL INVOICE & STATEMENTS ARE SENT BY EMAIL. PLEASE PROVIDE PREFERRED EMAIL ADDRESS.			
WHERE DID YOU HEAR ABOUT US?			

IF YOUR COMPANY IS NOT LIMITED PLEASE PROVIDE FULL NAME & HOME ADDRESS:	
FULL NAME	
ADDRESS	
D.O.B	

PLEASE ADD YOUR NAME IN BLOCK CAPITALS AND YOUR SIGNATURE TO CONFIRM THAT ALL DETAILS ARE CORRECT		
NAME:	SIGNATURE:	DATE:

APPLICATION FOR CREDIT ACCOUNT WITH SIGNATURE LED LIGHTING LIMITED

TRADE REFERENCE 1	
COMPANY NAME	
COMPANY ADDRESS	
POST CODE	
TELEPHONE NUMBER	
CONTACT EMAIL ADDRESS	
YEARS TRADING WITH COMPANY	

TRADE REFERENCE 2	
COMPANY NAME	
COMPANY ADDRESS	
POST CODE	
TELEPHONE NUMBER	
CONTACT EMAIL ADDRESS	
YEARS TRADING WITH COMPANY	

BANK DETAILS	
BANK NAME	
BANK ADDRESS	
POST CODE	
SORT CODE	
ACCOUNT NUMBER	
YEARS WITH BANK	

PLEASE ADD YOUR NAME IN BLOCK CAPITALS & SIGNATURE TO CONFIRM THAT YOU ACCEPT THE ABOVE		
NAME:	SIGNATURE:	DATE: