



LIMITED COMPANY CREDIT ACCOUNT APPLICATION FORM

Customers wishing to open an account are requested to supply the following information.

COMPANY DETAILS

Name of Company	
Invoice Address	
Postcode	
Telephone	Fax
Email	Website
Main Contact Name	
Telephone	Mobile
Email	
Accounts Contact Name	
Telephone	Mobile
Email	
Buyer Contact Name	
Telephone	Mobile
Email	
Delivery Address (If different from above)	
Postcode	
Registered Office Address	
Postcode	
Company Registration Number	

CUSTOMS AND EXCISE

The following section must be completed by all parties

VAT Registration Number	RDCO Number (If you are a reseller)
Main Business Activity	

DELIVERY DETAILS

Are there vehicle restrictions to the delivery point? Yes No

Is the delivery address able to accommodate a... Rigid Lorry Artic Lorry

What are the opening times of the delivery point?

What is the average load size at the delivery point?

Special Instructions

PRODUCT DETAILS

Please indicate average monthly volumes for any of the following products that you use.

Diesel (Ulsd)	Litres	<input type="text"/>
Fuel Cards	Litres	<input type="text"/>
Gas Oil	Litres	<input type="text"/>
Kerosene	Litres	<input type="text"/>
Petrols (Ulsj)	Litres	<input type="text"/>
Fuel Oil	Litres	<input type="text"/>
Lubricants	Litres	<input type="text"/>



CREDIT ACCOUNT APPLICATION FORM

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COMPANY DETAILS

Contact Name Trading Name

Please show sole proprietor of all partners names as per the following example: M Jones and Smith T/A Jones Haulage

Full Postal Address

Postcode

Telephone Fax

Email Website

Number of years trading under the above name

Main Contact Name

Telephone Mobile

Email

Accounts Contact Name

Telephone Mobile

Email

Buyer Contact Name

Telephone Mobile

Email

Please provide details of sole proprietors/partners

Full Name Date of Birth

Home Address Postcode

Full Name Date of Birth

Home Address Postcode

If less than two years at this address, please state previous address

Full Name

Home Address Postcode

Full Name

Home Address Postcode

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Special Instructions

PRODUCT DETAILS

Please indicate average monthly volumes for any of the following products that you use. Diesel (Ulsd) Litres Fuel Cards Litres Gas Oil Litres Kerosene Litres Petrols (Ulsd) Litres Fuel Oil Litres Lubricants Litres

TRADE REFERENCES

Please supply two trade references

Name
Address
Postcode
Contact Name
Telephone
Name
Address
Postcode
Contact Name
Telephone

BANK DETAILS

Name of Bank
Address
Postcode
Name(s) of Account Holder(s)
Bank Account Number
Sort Code

TO PROCESS YOUR APPLICATION THE FOLLOWING MUST BE COMPLETED

By signing below you expressly agree that we have your consent and the consent of any other employee, director, officer or agent whose personal information you may have given to use your/their personal information for such purpose. Any personal information given in our application process will be used to manage your account. It may be necessary to pass on the personal information to our agents or other reputable third party to enable us to provide you or your business with our fuel and other services. For example, we may pass the information to a credit reference agency or credit insurer or other credit management solution providers where a search may be conducted on the information so that an approved credit facility may be considered for you/your business. By signing this application you agree to the above.

Application to be signed by Director or Owner of Business

I/We have read the Terms and Conditions overleaf and agree to abide by them:

Signed:	Date:	Position Held in Company:
_____	_____	_____

Please state your preference for receiving invoices

<input type="checkbox"/> Email _____	<input type="checkbox"/> Fax _____	<input type="checkbox"/> Post _____
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INSTRUCTION TO YOUR BANK OR BUILDING SOCIETY TO PAY DIRECT DEBIT



Please complete all sections of this form and return to:

Ukay Fuels Limited

Ukay House, Threshelfords Business Park, Inworth Road, Feering, Colchester, Essex CO5 9SE

Service User Number

4 1 0 7 6 4

Name(s) of Account Holder(s)

[Blank text box for account holder name]

Bank/Building Society Account Number

[Blank boxes for account number]

Branch Sort Code

[Blank boxes for branch sort code]

Name and full postal address of your Bank or Building Society

To: The Manager

[Blank text box for bank name]

Bank/Building Society

[Blank text box for bank name]

Address

[Blank text box for address]

[Blank text box for address]

[Blank text box for address]

Postcode

OFFICIAL USE ONLY

Reference Number

[Blank boxes for reference number]

Instruction to your Bank or Building Society

Please pay Ukay Fuels Limited Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with Ukay Fuels Limited and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s)

[Blank text box for signature]

[Blank text box for signature]

Date

[Blank text box for date]

Banks and Building Societies may not accept Direct Debit Instructions for some types of accounts.

The Direct Debit Guarantee

This guarantee should be detached and retained by the payer



- This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.
- If the amounts to be paid or the payment dates change Ukay Fuels Limited will notify you seven working days in advance of your account being debited or as otherwise agreed.
- If an error is made by Ukay Fuels Limited or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us.