



H A S S E L B L A D

# Application for Monthly Credit Account

Please complete and fax or post back to us

Trading Name	Limited Company / Sole Trader / Partnership <i>(Delete as applicable)</i>
Contact Name	Telephone
Business Address	Mobile
	Fax
	E-mail
Registered Company No.	Delivery Address <i>(if different)</i>
No. of Years Trading	
Home Address <i>(Sole Traders Only)</i>	Directors Names
Owner / Tenant      How long at this Address? <i>(Delete as applicable)</i>	
Credit Limit Required	Name and Address of two Trade References  1.  <p style="text-align: right;">Tel No.</p> <hr/> 2.  <p style="text-align: right;">Tel No.</p>
Name and Address of your Bankers	
Bank Account Name	
Bank Account Number	
I confirm I have read and accept the Terms and Conditions of Sale, Service and Hire that apply to all transactions, copies of which have been made available to me.	
Signed	Name
Position in Company <i>(If applicable)</i>	Date

A Division of Hasselblad (UK) Limited