

**APPLICATION FOR CREDIT FACILITIES WITH J W CLARK LTD**  
**37 FINEDON ROAD ·IRTHLINGBOROUGH·NORTHANTS·NN9 5TY**  
**TEL: 01933 651224 / 07980 345522 FAX: 01933 704114**  
**Email: john@jwclarkltd.co.uk**  
**www.clarkgrabhire.co.uk**

**Company Name & Address:**

**Contact information:**

	Main contact:
	Accounts contact:
	Tel:
	Fax:
Postcode:	Email:

Company Reg No (If applicable):	Bank Name:
VAT No (If applicable):	Address:
Date Established:	
	Account No:
	Sort Code:

**Trade Reference 1**

**Trade Reference 2**

Company:	Company:
Address:	Address:
Tel:	Tel:
Fax:	Fax:
Email:	Email:
Contact Name:	Contact Name:

Signed on behalf of applicant

Print Name:	Maximum credit required: £
Signature:	Date:

**Credit Guarantee – Must be in every instance completed by the owner (s) / director(s) of the Applicant Company applying for credit and who will provide a personal guarantee**

In consideration of J W Clark Ltd agreeing to supply goods and/or services to the applicant company I/we the undersigned, being the owner(s) / director(s) of the applicant company jointly and severally guarantee payment of all financial obligations of the Applicant Company to J W Clark Ltd.

	Owner/Director	Signature	Date
1			
2			
3			

### **Accounts Office Only**

<b>Account Limit:</b>	<b>Account No:</b>
<b>Date Account Opened</b>	
<b>Authorised:</b>	<b>Date:</b>

- Please attach official company letterhead signed and dated
- Please ensure that trade referees named can speak for the amount of credit requested
- Please ensure that every box is filled out in order that we can process application