



# A R C H E R S

## Archersigns Limited

Crown House, 80 Crown Road, St Margarets Road  
Twickenham TW1 3ER  
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## Application For Credit Facilities

### Company Details

Full Trading Name: \_\_\_\_\_

Trading Address: \_\_\_\_\_

Post Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Website Address: \_\_\_\_\_

Other name the company may be known by: \_\_\_\_\_

Type of the Company: (Please Tick):

Limited Co: Company Reg.No: \_\_\_\_\_

\_\_\_\_\_ Holding Company (if any)

\_\_\_\_\_ Managing Director:

\_\_\_\_\_ Address of Registration office:

Have any of the directors been associated with a failed or insolvent company  
or entered into a voluntary arrangement Yes  No

PLC: \_\_\_\_\_ Holding Company (if any): \_\_\_\_\_

Partnership: Name: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_ Name: \_\_\_\_\_ Address: \_\_\_\_\_

Sole Trader: Name: \_\_\_\_\_ Address: \_\_\_\_\_

Has the proprietor or any of the partners ever been served with a Bankruptcy Petition  
or any individual been the subject of a Bankruptcy Order Yes  No

**Date Established:** \_\_\_\_\_ **Number of Employees:** \_\_\_\_\_

**Annual Turnover:** \_\_\_\_\_ **Type of Business:** \_\_\_\_\_

**Bank Details** Name: \_\_\_\_\_ Address: \_\_\_\_\_

Sort Code: \_\_\_\_\_ Account Number: \_\_\_\_\_

Trade Reference 1: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Trade Reference 2:  
Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Invoicing Details: Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone No: \_\_\_\_\_

Credit Requirements: Yes  No

If yes, maximum monthly credit anticipated: \_\_\_\_\_

Payment terms: 30 days net monthly account

Payment must be made before the end of month following date of invoice, if there is any reason why this is not practical please let us know what criteria will enable it to be so

(e.g. what date does your company close month end accounts.)

The signing of the Application Form constitutes the acceptance of this.

We understand that this application is subject to acceptance and that you reserve the right to decline the application. We have read, understood and accept the Archers Terms and Conditions and undertake to maintain the payment terms described.

Signed on behalf of the Company: .....

Position: .....

Full Name: .....

Date: .....