



# Hire Station

Tools for Industry, Construction & DIY

## Application for Credit Facilities

### SEARCHED IT

Please return signed application form to:

**Hire Station Limited**  
Fields Farm Road, Long Eaton  
Nottinghamshire  
NG 10 3FZ

Tel: 0115 973 7400 Fax: 0115 9729612.

Please tick legal entity type below:

Limited / PLC   
Sole Trader / Partnership   
Other please state .....


### Virtual Hire Partner : Searched It

#### Customer Details

Name \_\_\_\_\_  
Trading Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Postcode \_\_\_\_\_  
Tel \_\_\_\_\_  
Fax \_\_\_\_\_  
E-mail \_\_\_\_\_  
Mobile \_\_\_\_\_

Company Registration No. \_\_\_\_\_  
Trading Style \_\_\_\_\_  
Invoice/Statement Address \_\_\_\_\_  
\_\_\_\_\_  
Postcode \_\_\_\_\_  
Tel \_\_\_\_\_  
Fax \_\_\_\_\_  
VAT No \_\_\_\_\_  
Nature of business \_\_\_\_\_  
Insurance company \_\_\_\_\_

**Invoicing - All Hire Station Invoices and Statements are delivered electronically - Please complete delivery requirement below**

EMAIL \_\_\_\_\_

FAX \_\_\_\_\_

#### Bank Details

Bank \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone No \_\_\_\_\_

Account name \_\_\_\_\_  
Account no \_\_\_\_\_  
Sort code \_\_\_\_\_

#### Full Names(s) of owner/partners and home address

Name \_\_\_\_\_ Address \_\_\_\_\_ Number of Partners in the Business \_\_\_\_\_  
Date of birth \_\_\_\_\_  
Date of birth \_\_\_\_\_

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

#### Trade References

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Postcode \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Tel \_\_\_\_\_  
Fax \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Postcode \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Tel \_\_\_\_\_  
Fax \_\_\_\_\_

**Credit** - Our terms require that payment be made by the end of the month following invoice.

Will you be trading with us on a regional or national basis. Please delete as appropriate: Regional / National

Credit Limit Required \_\_\_\_\_

#### Customer Declaration

I hereby acknowledge receipt and accept Hire Station Limited Standard **Conditions for Hire and Sale of Products to consumers and businesses** which will apply to all future transactions unless agreed in writing by a Company Director.

I further confirm that payment will be made **End of Month following month of Invoice** and any variation to these payment terms must be agreed in writing

In accordance with the Data Protection Act 1998 I/we confirm that I am/we are the above named individuals or have their consent to provide you with the above information insofar as it comprises personal Data and consent to you processing that, and any other information which comes into your possession during the period in which this account is running. I understand that in the course of opening and running a credit account you will obtain further personal data from and may disclose personal data to third parties (including credit reference agencies) for the purpose of running your business and accounts management. I consent to that processing.

Signed \_\_\_\_\_ Position \_\_\_\_\_  
Print \_\_\_\_\_ Date \_\_\_\_\_

#### For Office Use Only

Originating Depot \_\_\_\_\_  
Sales Representative \_\_\_\_\_  
Comments \_\_\_\_\_

Account No \_\_\_\_\_ Date Opened \_\_\_\_\_  
Credit Limit Given \_\_\_\_\_  
Authorised by: \_\_\_\_\_  
Print Name: \_\_\_\_\_