



WatkinsHIRE™

Please complete and return by fax to 01594 840026 for the attention of Melanie or email to melanie@watkinshire.co.uk

Application for a Credit Account

Company Name: <input style="width: 95%;" type="text"/> Company Address: <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> Postcode: <input style="width: 95%;" type="text"/> Nature of Business: <input style="width: 95%;" type="text"/> VAT Registration No: <input style="width: 95%;" type="text"/>	Company Reg No. <input style="width: 95%;" type="text"/> Invoice Address: <input style="width: 95%;" type="text"/> (if different) <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> Postcode: <input style="width: 95%;" type="text"/> Holding Co: <input style="width: 95%;" type="text"/>
Delete as appropriate: LTD / PLC / Partnership / Sole Trader / Non Limited	
How Long Trading: <input style="width: 95%;" type="text"/> Purchasing Contact: <input style="width: 95%;" type="text"/> Tel. No. <input style="width: 95%;" type="text"/> Fax. No. <input style="width: 95%;" type="text"/> Email Address: <input style="width: 95%;" type="text"/>	Credit Required: £ <input style="width: 95%;" type="text"/> Accounts Contact: <input style="width: 95%;" type="text"/> Tel. No. <input style="width: 95%;" type="text"/> Fax. No. <input style="width: 95%;" type="text"/> Email Address: <input style="width: 95%;" type="text"/>
Is a Purchase order required for each invoice: <input type="checkbox"/> YES / <input type="checkbox"/> NO If Yes, who is responsible for this: Name: <input style="width: 95%;" type="text"/> Tel No. <input style="width: 95%;" type="text"/>	
Trade References: 1. <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/>	2. <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/>
Bank Details: Name of Bank: <input style="width: 95%;" type="text"/> Address: <input style="width: 95%;" type="text"/> <input style="width: 95%;" type="text"/>	Account Name: <input style="width: 95%;" type="text"/> Account Number: <input style="width: 95%;" type="text"/> Sort Code: <input style="width: 95%;" type="text"/>

I certify that the information given is correct, accept and understand the terms and conditions of the hire as stated by Watkins Hire Limited and agree that Watkins Hire Limited contact your bankers.

Signed _____ Print Name _____
Position _____ Date ____/____/____

Credit will only be granted following completion of a successful credit check and your agreement to our payment terms.

PLEASE ATTACH COPY OF HEADED PAPER.

Internal use: Monthly Hire Value: £ _____ Credit Approved: £ _____ By: _____



WatkinsHIRE™

Please sign and return by fax to 01594 840026

Watkins Hire Ltd Terms & Conditions of Payment

Hire Invoicing

All Hire Charges commences from day of delivery (inclusive). All hire rates quoted are based on a weekly charge (7 days) or part thereof, i.e. hire charges are on full weeks only. All hire rates are based on the minimum hire period of contract. No variation may be made unless agreed in writing by W.H.L. to the hirer.

W.H.L. will invoice the Hirer for four weeks or one month hire, any installation, commissioning, delivery and return transport charges on the date of delivery and thereafter W.H.L. will continue to invoice the Hirer four weekly or monthly in advance.

Payment Terms

Should a credit account be granted, Invoices are due for payment in full within 30 days of invoice date. If no credit account is granted, Invoices are due for payment in full within 7 days of invoice date or the day before the start of the hire period as stated on the invoice, whichever is sooner.

In the event of any invoice remaining unpaid for a period of 7 days after the due date for payment then the sum due upon such invoice, shall bear interest at a rate of 2½ % per month until the date of payment.

I confirm we agree to the Terms & Conditions of payment as set out above

Signed	_____	Name	_____
Company	_____	Position	_____
Address	_____	Date	____/____/____

Please Note: Failure to return document signed may result in delay of delivery