Severn Trent Water

CREDIT APPLICATION FOR A 30 DAY CREDIT BUSINESS ACCOUNT

|  |
| --- |
| **BUSINESS CONTACT INFORMATION**  |
| Company name |  | Please tick applicable box |
| Registered company address |  | 🞎 Sole proprietorship🞎 Partnership  | 🞎 Corporation 🞎 Other |
| Phone number |  | Fax number |  |
| Date business commenced |  | Contact name |  |
| Registered company number |  |  E-mail |  |
| **BUSINESS AND CREDIT INFORMATION** |
| Invoice / Statement Address (**If different from above**) |  | Bank name: |  |
| Finance department contact details: Name |  | Bank address |  |
| Phone |  | Sort code |  |
| Fax |  | Account number |  |
| E-mail |  |  |  |
| **BUSINESS/TRADE REFERENCES** |
| Company name |  | Phone |  |
| Address |  | Fax |  |
|  |  | E-mail |  |
| Type of account |  | Other |  |
| Company name |  | Phone |  |
| Address |  | Fax |  |
|  |  | E-mail |  |
| Type of account |  | Other |  |
| **DECLARATION** |
| 1. I hereby submit the above information for the sole purpose of opening a Credit Account with Severn Trent Water ltd.

I acknowledge that all orders are accepted by Severn Trent water Ltd in accordance with their terms and conditions and agree that my Company shall be bound by them in all transactions. Payment will be forwarded to ensure that cleared funds are receipted by Severn Trent Water Ltd. no later than 30 days following the date of the invoice. **N.B. Authorised signatory should be a Director or a Proprietor.**1. Please sign and return this form, along with a copy of your Company letterhead to;

 Severn Trent water Ltd, Accounts Receivable, PO Box 5311, Coventry CV3 9FL, or alternatively e-mail: arteam@severntrent.co.uk |
| **SIGNATURE** | **For Office use** |
| Signature |  | Checked to D&B |  |
| NamePosition |  | SAP Account Number |  |
| Date |  | Date |  |