



CREDIT APPLICATION FORM

Trading Name	<input type="text"/>	Registered Office (if applicable)	<input type="text"/>
Address	<input type="text"/>		<input type="text"/>
	<input type="text"/>	Company Reg No.	<input type="text"/>
Email	<input type="text"/>	P.R.S.I. No.	<input type="text"/>
Phone No.	<input type="text"/>	V.A.T. No.	<input type="text"/>
Fax No.	<input type="text"/>	Nature of Business	<input type="text"/>
Mobile No.	<input type="text"/>	Place of Employment (if applicable)	<input type="text"/>
Year Established	<input type="text"/>		<input type="text"/>

PARTNERSHIP DIRECTORS

1 Name	<input type="text"/>	Address	<input type="text"/>
2 Name	<input type="text"/>	Address	<input type="text"/>
3 Name	<input type="text"/>	Address	<input type="text"/>

TRADE REFERENCE

1 Company Name	<input type="text"/>	Contact	<input type="text"/>
Address	<input type="text"/>	Phone	<input type="text"/>
2 Company Name	<input type="text"/>	Contact	<input type="text"/>
Address	<input type="text"/>	Phone	<input type="text"/>
3 Company Name	<input type="text"/>	Contact	<input type="text"/>
Address	<input type="text"/>	Phone	<input type="text"/>

I the undersigned hereby declare that I am a duly authorised officer at the above mentioned company/entity and that the information I have provided herewith is true and correct. I authorise any person or company to give information as required in relation to credit enquiries in accordance with the data protection acts. If you do not wish to receive correspondence or special offers by email please tick this box.

Accounts Contact	<input type="text"/>	Site Address	<input type="text"/>
Order Contact	<input type="text"/>	Are order Numbers required	<input type="text"/>

I agree to pay interest at the rate of 1% per month on any balance which becomes overdue. I understand and agree that any credit allowed on foot of this document may be cancelled by serving notice by ordinary post. I have read and agree to be bound by our Conditions of Sale, as may be amended from time to time.

Credit Requirement	<input type="text"/>	Position Held	<input type="text"/>
Settlement terms: 30 days	<input type="text"/>	Date	<input type="text"/>
Signed	<input type="text"/>		

SEPA Direct Debit Mandate

Part complete part 1 to 4 to instruct your Bank to make payments directly from your account. Then return the form to:

N&C Enterprises, Kilmeague, Naas, Co.Kildare, W91 HHP2, Ireland

Credit identifier	IE19SCT808088
Unique Mandate Reference	<input type="text"/>
1 Name of Account Holder	<input type="text"/>
2 Address of Account Holder	<input type="text"/>
3 BIC	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
4 Account Number (IBAN)	<input type="text"/>

Creditors Name: **N&C Enterprises,**
 Creditors Address: **Blackhill, Kill, Co. Kildare.**
 Country: **Ireland**

THE DIRECT DEBIT GUARANTEE: By signing this mandate form, you authorise (A) N&C Enterprises to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from N&C Enterprises. As part of your right, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited. NOTE: Your rights regarding this mandate are explained in a statement that you can obtain from your bank.

* Type of payment: Recurrent or One-off payment (please tick)

Signature(s) 1: _____ 2: _____ Date: _____

Please return this Mandate to N&C Enterprises, Kilmeague, Naas, Co.Kildare, W91 HHP2, Ireland and not your bank.



FOR LIMITED COMPANIES ONLY

In consideration of N&C Enterprises (hereinafter called "the Company") at my/our request giving credit and affording facility as set out overleaf to

(hereinafter called "the Customer") I/we the undersigned hereby agree to pay and satisfy to the Company, on demand, all sums which are now or shall at any time be owing to the Company on any account whatsoever from the Customer together with all interest, discount or other charges including legal charges.

The liability of each signatory hereto shall be joint and several.

Dated the day of

SIGNED, SEALED AND DELIVERED by the said:

1. 2.

in the presence of

Witness:

Address:

Occupation:

I/we certify that I/we have this day read the above guarantee and agree to abide to its terms.

Dated the day of

SIGNED, SEALED AND DELIVERED by the said:

1. 2.

in the presence of

Witness:

Address:

Occupation:
