

(FOR OFFICE USE ONLY)

CUSTOMER ACCOUNT APPLICATION FORM

REF: _____
(FOR OFFICE USE ONLY)
REP: _____
(FOR OFFICE USE ONLY)
CC: _____
(FOR OFFICE USE ONLY)



ACCOUNT NAME: _____
INVOICE ADDRESS: _____ **DELIVERY ADDRESS:** _____

TELEPHONE NO: _____ **FAX NO:** _____
MOBILE NO: _____ **EMAIL ADDRESS (Sales):** _____
ACCOUNTS CONTACT: _____ **PURCHASING CONTACT:** _____
TELEPHONE NO: _____ **TELEPHONE NO:** _____
EMAIL ADDRESS (Statements): _____
PREMISES TYPE: Owned Leased Rented

LIMITED COMPANY INFORMATION

FULL COMPANY NAME: _____
CO. REGISTRATION (NOT VAT) NO: _____
DATE OF INCORPORATION: _____
TRADING NAME (If different from above): _____

HOME TELEPHONE NO: _____

SOLE TRADER INFORMATION

NAME: _____
ADDRESS: (Must be private residence details) _____

PPS NUMBER: _____
HOME TELEPHONE NO: _____

TRADE REFERENCES: (Please provide name, address & telephone number for each)

- 1. _____
- 2. _____
- 3. _____

I/We agree to the terms & conditions applied by CJO'LOUGHLINS that payment is made in full within agreed credit limits
Note: Signature must be that of Directors in case of Limited Company and in all other cases that of Sole Trader.

SIGNATURE(S): _____
BLOCK CAPITALS: _____
POSITION: _____
DATE: _____

PLEASE RETURN APPLICATION FORM TO CJ O'LOUGHLIN & SONS (COURTOWN) LTD, COURTOWN DEMESNE, GOREY, CO WEXFORD.

SEPA Direct Debit Mandate

Legal Text: By signing this mandate form, you authorise (A) C.J.O'LOUGHLIN & SONS (COURTOWN) LTD to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instruction from C.J.O'LOUGHLIN & SONS (COURTOWN) LTD. As part of your rights, 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. Your rights are explained in a statement that you can obtain from your bank. **Please complete all fields 1 - 5 and sign below.**

Creditor Name and Address: C.J.O'LOUGHLIN & SONS (COURTOWN) LTD, Courtown Demesne, Gorey, Co. Wexford

Creditor Identifier: IE11ZZZ111093 Unique Mandate Reference: _____

1 Name of Debtor _____

2 Address of Debtor _____ City _____ Country _____

3 Swift BIC _____ 4 Account Number (IBAN) _____

5 Type of payment
Recurrent or One-Off Payment (Please tick v)

SIGNATURE(S): _____
BLOCK CAPITALS: _____
DATE: _____