

Credit Application

Please use block capitals



Please complete and return **both sides** of this form, together with a copy of your letterhead paper, to
Rompa Ltd, Unit 1-4, Carrwood Ind Est, Carrwood Road, Chesterfield, S41 9QB • Email sales@rompa.com • Tel 01246 211 777

01. Company Details

Company Full Name (incl. Ltd etc where applicable)

Company Address (incl. Postcode)

Company Registration Number

Buyer Contact Name

Buyer Email

Buyer Tel

Finance Contact Name

Finance Email

Finance Tel

02. Trade References

Company Name

Company Address (incl. Postcode)

Years trading with this company

Company Name

Company Address (incl. Postcode)

Years trading with this company

03. Partner Details

If not a Ltd Company, provide details for up to 3 partners.

Partner name

Home Address (incl. Postcode)

Home Contact Tel

Partner name

Home Address (incl. Postcode)

Home Contact Tel

Partner name

Home Address (incl. Postcode)

Home Contact Tel

04. Bank Details

Bank Name

Bank Address (incl. Postcode)

Sort Code

Account Number

Form continues overleaf

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05. Application

I / We apply for a credit account subject to the agreed terms and conditions of sale and agree to pay in accordance with these terms.

Your Name

Job Title

Signature

Date

D	D	M	M	Y	Y	Y	Y
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06. Internal Use Only

Authorised by

Date credit agreed

D	D	M	M	Y	Y	Y	Y
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Credit Limit Agreed