

**BLEACH OF LAVANT LIMITED  
NEW CUSTOMER APPLICATION FORM - LIMITED COMPANY**

Company Name		Date of Application	
Nature of Business			
Email		POD with invoice yes ' / no	
Tel		Fax	
Contact Name Distribution		Contact Name Invoicing	
Trading Address(collect freight from)		Invoice Address	
post code		post code	
VAT reg'd number		Company Reg'd number	
Bank reference			
post code			
Trade Reference 1			
post code			
telephone no.		fax no.	
Trade reference 2			
post code			
telephone no.		fax no.	
Please state estimated monthly credit required			
All goods are carried under RHA terms & conditions of carriage			
All Goods in Transit claims and Bleach of Lavant liability is limited to £5000 per ton pro rata			
I agree to abide by Bleach of Lavant Ltd terms and conditions of Carriage and payment terms of nett monthly Signed			
Print Name		Date	