

## APPLICATION FOR CREDIT ACCOUNT

Please complete all sections in **BLOCK CAPITALS** and return to the Sales Department  
Please note ALL pages of this form must be returned regardless of whether they are completed or not.

### Section 1: About your Business

Name of Business:			
Delivery Address:			
		Postcode*:	
Store Tel:			
SAN No. (for electronic ordering):			
VAT No. (if applicable):			
Age of Business:	Years	Months	
Trading Nature:	Is your business a retail outlet open to the general public?		Yes: <input type="checkbox"/> No: <input type="checkbox"/>
	Nature of your business:		Bookshop: <input type="checkbox"/> Internet: <input type="checkbox"/> Other: _____
Applicant's Contact Details	Address:		
	Tel:	Fax:	
	Email:		
Additional Contact Names:	Manager Name (if different to above):		
	Tel:		
	Buyer Name (if different to above):		
	Tel:		
Other Contact Names and Contact Details:			
Statement Address (if different to delivery address):		Postcode*:	
Accounts Manager Name:			

## APPLICATION FOR CREDIT ACCOUNT

Preferred Method of Contact:  Applicant's E-mail:  Applicant's Telephone No:  Store Telephone No:

\* It is essential to provide your postcode

## Section 2: Credit Limit and Trade References

Turnover:	Total T/O?	£_____k	Books T/O?	£_____k
Credit Limit:	Anticipated monthly purchases through Bertrams:	£_____	Credit Limit Amount Requested:	£_____
Trade References:	Booksellers without Trade References, please give 3 professional references (i.e. solicitor / accountant / character reference)			
Referee 1:	Name:			
	Contact:			Account No:
	Tel:			Fax:
	Email:			
Referee 2:	Name:			
	Contact:			Account No:
	Tel:			Fax:
	Email:			
Referee 3:	Name:			
	Contact:			Account No:
	Tel:			Fax:
	Email:			

## Section 3: Your Bank Details

Please provide details of your bank account. Please note, that in submitting this application you consent to your data being submitted to a commercial credit reference agency in order to verify your credit worthiness.

### Bank Details

Bank Name:	
Branch:	
Address:	
Postcode:	

## APPLICATION FOR CREDIT ACCOUNT

Account Name:							
Account Number:							
Sort Code:		/		/			
Swift Code*:							
IBANN Number*:							

\* Please provide these details if the account is based outside of the United Kingdom.

## Section 4: About the Structure of your Business

Are you? (please tick one box):

Franchise:		Please complete <b>part A</b> of this section
Licensed Manager:		
PLC:		Please complete <b>part B</b> of this section
Limited Company:		
Sole Trader:		Please complete <b>part C</b> of this section
Partnership:		

### Part A – Franchises and Licensed Managers only

#### 1. Please print your full name:

First Names:							
Surnames:							
Date of Birth:		/		/			

#### 2. If you have a business partner/s please provide full name/s:

First Names:							
Surnames:							
Date of Birth:		/		/			
First Name:							
Surnames:							
Date of Birth:		/		/			

#### 3. Please provide your home address and telephone number:

Address:							
Postcode:							

## APPLICATION FOR CREDIT ACCOUNT

Telephone Number:	
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### 4. If you have lived here for less than 2 years please give us your previous address:

Address:	
How long have you lived here?	
Postcode:	

Address:	
How long have you lived here?	
Postcode:	

Address:	
How long have you lived here?	
Postcode:	

### 5. Are you responsible for paying our account?

Yes  No

If no, please tell us who will be

First Names:	
Surnames:	
Date of Birth:	/ /
Address:	
Postcode:	
Telephone Number:	

Please now go to section 5

## Part B – PLCs and Limited Companies only

### 1. Company Details:

Company Name:	
Contact Name:	
Company Address:	
Postcode:	
Telephone Number:	

## APPLICATION FOR CREDIT ACCOUNT

Fax Number:	
Email:	

### 2. Registered Office:

Registration No.:	
Office Address:	
Postcode:	
Telephone Number:	
Fax Number:	
Email:	

Please now go to section 5

## Part C – Sole Traders and Partnerships only

### 1. Please print your full name:

First Names:	
Surnames:	
Date of Birth:	/ /

### 2. Please provide your home address and telephone number:

Address:	
Postcode:	
Telephone Number:	
Property Ownership:	Owner <input type="checkbox"/> Tenant <input type="checkbox"/>

### 3. If you have lived here for less than 2 years please give us your previous address:

Address:	
How long have you lived here?	
Postcode:	

Address:	
How long have you lived here?	
Postcode:	

## APPLICATION FOR CREDIT ACCOUNT

Address:	
How long have you lived here?	
Postcode:	

### 4. If you have a Business Partner/s please provide their full name/s:

First Names:	
Surnames:	
Date of Birth:	/ /
Address:	
Postcode:	
First Names:	
Surnames:	
Date of Birth:	/ /
Address:	
Postcode:	

## Section 5: Important Notes and Declaration

### Important notes:

1. Before signing below, you should carefully read our Terms and Conditions of Business with our Customers.
2. We reserve the right to terminate supplies if any of the details given on this form are false.

### Declaration:

1. I have read, understood and agree to be bound by Bertram Trading Limited's Terms and Conditions of Business (a copy of which has been provided to me).
2. I confirm, warrant and certify that I have the requisite authority to bind all persons named in this application, upon which such Terms and Conditions of Business shall constitute legal, valid, binding and enforceable obligations.
3. In the case of a business being carried on as a Partnership or Limited Company and in consideration of supplies being made by Bertrams and/or its successors, I/We hereby jointly and severally guarantee payment and agree to pay all such sums as may be due to Bertrams in so far as the same may from time to time remain outstanding.

Signature:	
Name:	
Date of Birth:	Date:

**If you are operating as a Partnership or Limited Company, all Partners / Directors must also sign to confirm their agreement to the terms stated above.**

Signature:	
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## APPLICATION FOR CREDIT ACCOUNT

Name:			
Date of Birth:		Date:	

Signature:			
Name:			
Date of Birth:		Date:	

Signature:			
Name:			
Date of Birth:		Date:	

## Finally...

Please tell us how you heard about Bertrams.

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Thank you for completing this Application Form. You will hear from us shortly. If we open your account, we will write to you with confirmation of your discount and credit terms (as applicable). Should you have any queries or require any additional information, please do not hesitate to contact us.

### For Bertrams use only:

Final cl £:	
Date:	
Auth:	