

# Mitchell Storage & Distribution Ltd

Accounts Department, Units 47 & 48 the Warren. East Goscote Leicester LE7 3XA

Telephone 01162 604080 Fax 01162604081

## Credit Application

(All details must be filled out in full in order for an account to be opened)

Full Trading Name:			
Full Address Details:   Including Post Code:			
Telephone No: (include STD code)		Fax No: (include STD code)	
Email Address:			
Company Registration No: or Name of Proprietor(s):			
Full Address Details of Proprietor(s):   Including Post Code:			
Telephone No: (include STD code)		Mobile Phone No:	
Proprietor(s) Date of Birth			
Nature of Business:			
Anticipated Weekly Spend:	£		
<b>Trade References:</b>			
Please provide details of THREE referees (banks/business) including contact name, company name, telephone number and fax number if possible.			

In order to process this application credit information may be obtained from or supplied to a third party

Applicant (s) Authorised Signature: \_\_\_\_\_