

Company Name		
Trading Name (if different)		
Address		Telephone
		Fax
		e-mail
Postcode		Co. Reg. No:
Registered Office		Date of Registration
		VAT Reg. No
Limited Company <input type="checkbox"/> PLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> <i>Please tick as appropriate</i>		
No of Years Trading	Current Turnover	No of Staff
No of Outlets	Accountants Name	Telephone
Type of Premises	Freehold <input type="checkbox"/> Leased <input type="checkbox"/>	Rented <input type="checkbox"/> <i>Please tick as appropriate</i>
Details of Directors / Partners / Sole Proprietor		
1. Name	Address	
	Postcode	Telephone
2. Name	Address	
	Postcode	Telephone
3. Name	Address	
	Postcode	Telephone
Bankers Name		Sortcode
Address		
		Account No
Telephone	A/C Name	
Trade Reference (Your present source of CCTV suppliers)		
1.Name of Supplier		
Address		
Telephone	Credit Limit	A/C Since
2.Name of Supplier		
Address		
Telephone	Credit Limit	A/C Since
Name of person in charge of accounts		Credit Limit Required
I / We have read your trading terms and conditions of sale and agree that they supersede any terms and / or conditions confirmed in our purchase order.		
Signed		Name
Authorised Signatory		
Position	Date	