



# Depot Account Application Form

PLEASE COMPLETE ALL SECTIONS IN BLOCK CAPITALS

<b>Business Account: Y/N</b> <small>(Please circle)</small>	<b>Name:</b>
<b>Sole Trader/Partnership/Ltd/LLP</b> <small>(Please circle)</small>	<b>Type of Trade:</b> <i>(i.e. carpenter/builder/self-build/renovation etc)</i>
<b>Personal Account: Y/N</b>	<b>Name:</b>
<b>Full Address:</b>	<b>Post Code:</b>
<b>Tel No:</b>	<b>Mobile Number:</b>
<b>Email Address:</b>	
<b>Additional contact:</b>	<b>Name:</b> <span style="float: right;"><b>Tel No:</b></span>

**OPENING PAYMENT £ ..... BACS / CARD / CASH (Please Circle)**

***YOUR ACCOUNT WILL BE OPENED ON RECEIPT OF CLEARED FUNDS***

**PURCHASES ARE SUBJECT TO COVERS' STANDARD TERMS AND CONDITIONS OF SALE WHICH ARE AVAILABLE ON REQUEST.**

Signed: ..... Date: .....

Print Name: .....

<b>FOR DEPOT USE ONLY:</b>			
Name and Signature of Originator:			
Depot Managers Signature:			
Depot:	Rep:	Trade Letter:	



**SECURITY INFORMATION FORM**

Mandatory requirements to prevent fraudulent transactions

ACCOUNT NAME .....

To protect your account from possible fraudulent activity it is mandatory to have a password when ordering goods. please provide a password below in the required format.

.....  
.....

*\*password to be any combination of at least 6 letters or numerals.*

Do you require **WRITTEN ORDERS** to be presented before goods are supplied - either for collection or delivery **YES/NO**

Do you require a **VERBAL REFERENCE** to be shown on all invoices – these will require an order format or stipulated reference requirement **YES/NO**

Please list below—use separate sheet if necessary

.....  
.....  
.....

Do you require operatives to show ID, or identify themselves **YES/NO**  
Name or ID Number will be shown on all invoices  
Please provide a separate sheet with details of your requirements

**THE ACCOUNT CANNOT BE OPENED UNTIL A PASSWORD IS PROVIDED. PLEASE BE AWARE THAT ANY UNAUTHORISED USE OF YOUR ACCOUNT WILL REMAIN THE RESPONSIBILITY OF THE ACCOUNT HOLDER**

**SIGNED:** ..... **PRINT NAME** .....

Position with Account Holder ..... Date .....

**All invoices/credit notes/& statements will be emailed**

Please confirm email address for these documents.....

Product & Company Information – We would like to send you information & special offers from time to time (our mailing lists are NOT available to 3<sup>rd</sup> parties)

Would you like to receive such information by email? **YES/NO**

Please confirm email address: .....

Would you like to receive such information by text or social media? **YES/NO**

If yes, please confirm mobile phone number .....

Our special offers are also accessible via our website or social media