

## **HIRE & SALES**

HOME ADDRESS

TOWN:

FREEHOLD:

CREDIT CONTROL USE ONLY	(V19-0523)
CHECKED BY:	DATE:
AUTHORISED BY:	CREDIT LIMIT: £
COMMENTS:	
	ACC:

Please ensure every section is completed and you have attached your Hired-In Plant Insurance. If you require our Hire Secure loss waiver, please complete Section D and complete the loss waiver. **Limited Companies & LLPs** Please provide a recent Bank Statement & Utility Bill. **Sole Traders & Partnerships** Please provide a copy of your Passport or Photocard Driving Licence together with a recent Bank Statement and Utility Bill for your home address as shown in Section C. **SECTION A – Trading Details** TRADING/COMPANY NAME: NATURE OF BUSINESS: LENGTH OF TIME IN BUSINESS TRADING ADDRESS: TOWN: POSTCODE: OFFICE TEL: OFFICE MOBILE: NAME OF PERSON RESPONSIBLE FOR PAYING INVOICES: **EMAIL** TEL/MOBILE NAME OF PERSON RESPONSIBLE FOR HIRE & SALES: TEL/MOBILE **EMAIL** INVOICE/STATEMENT ADDRESS: [If different from above] TOWN: POSTCODE: TEL: SECTION B – Limited Companies & LLPs only [Sole traders & partnerships go to section C] CO. REGISTRATION NO: NAME OF DIRECTORS or PARTNERS: (if more than two, please state MD & FD only) **SECTION C - Sole Traders & Partnerships** 1. FULL NAME: D.O.B. HOME ADDRESS TOWN: POSTCODE: FREEHOLD: LONG LEASEHOLD: RENTAL: OTHER: 2. FULL NAME: D.O.B.

POSTCODE:

RENTAL:

OTHER:

LONG LEASEHOLD:

## SECTION D - Hire Secure loss & damage waiver

waiv	ver facility. This is optional when hiring items from us wipulsory when hiring any item with a value of more than £	th a value of less than £1500, but Hire Secure cover is 1500. Maximum Excess £500. Details and Proposal Form on	
	I wish to use the Hire Secure facility for ALL equipmen	nt hired.	
	I only wish to use the Hire Secure facility when the equipment hired is worth more than £1500. In this case I accept FULL LIABILITY for any loss or damage to any equipment hired with a value of less than £1500.		
SEC	TION E - Trade References		
1.	COMPANY NAME:	CONTACT:	
	TEL:	EMAIL:	
	TOWN:	POSTCODE:	
2.	COMPANY NAME:	CONTACT:	
	TEL:	EMAIL:	
	TOWN:	POSTCODE:	
3.	COMPANY NAME:	CONTACT:	
	TEL:	EMAIL:	
	TOWN:	POSTCODE:	
SEC	TION F		
on p I/W Hire	clare that I have completed the form truthfully and am autoayment by BACS [Cheques no longer accepted] 30 days are have read and accept the CPA terms and conditions attacks [Secure cover is taken] and those shown below, on the uncompany.	ched [or the HAE terms and conditions attached if HAE	
Prin	t name:	Signed:	
Posi	tion:	Date:	

## TERMS AND CONDITIONS (INCLUDING DATA PROTECTION ACT)

In processing your application we may make enquiries of third parties who may record these enquiries. In the event that you do not adhere to our payment terms your details may be passed to a licensed credit reference agency or debt recovery agency.

A customers signature, or that of an employee, is binding upon the customer at all times. Any query as to charges must be made in writing within seven days of the invoice date. Credit Accounts are due for settlement 30 days from end of month invoiced, unless otherwise advised. In the event that your Credit Score changes adversely, the account goes overdue, or the credit limit is exceeded, then Credit facilities may be withdrawn, in which case <u>all invoices will become due immediately</u>; If Legal action follows, interest will be charged on a daily basis from the date due until the date of actual payment, at 8% per annum above HSBCs base rate for the time being in force. There will also be a Collection Charge of between £40 and £100, depending on the size of the debt.

Please now Email to creditcontrol@chippindaleplant.com or your local Depot Manager.

Full details at www.chippindaleplant.com