

**LeisureBench Ltd
Application for Account**

Please complete all sections:								
Company Name: <i>(please indicate if a Limited Company, Sole Trader or PLC)</i>								
Company Registration No:								
Address:								
Post Code:								
Telephone No:								
Fax No:								
Email:		Website:						
Accounts Dept. contact name:					Warehouse Dept. contact name:			
Bank Details:								
Bank Name:		Branch:		Account No:		Sort Code:		
Registered Office Address: <i>(if different from above)</i>								
Address:								
Post Code:								
Telephone No:								
Fax No:								
Email:								
Names of Proprietors: <i>(if non-limited Company please include date of birth, and home address)</i>								
Trade References:								
Name:								
Address:								
Post Code:								
Telephone No:								
Contact Name:								
I hereby authorise LeisureBench Ltd to obtain references from the above as and when appropriate. I agree to abide by the terms and conditions as set out by LeisureBench Ltd, which include that ALL invoices are due to be paid within 30 days from the date of invoice and that a Purchase Order is also to be provided.								
I declare that I have authority to apply for a credit limit of £ on behalf of the Company:								
Signed:		Print Name:						
Position:		Date:						

PLEASE COMPLETE IN FULL AND RETURN VIA POST, FAX OR EMAIL (DETAILS BELOW) FAO: ACCOUNTS DEPARTMENT:

LeisureBench Ltd, Quornland Farm, Moor Lane, Stathern, Leicestershire. LE14 4EZ. Tel: 01949 862920 Fax: 01949 862929 Email: accounts@leisurebench.co.uk