

Your Business Details	
Name	Date of Birth(if Solo Trader)
Trading Name(if different from above)	
Address	Phone
	Fax
	Mobile
Postcode	Website
Email	
Previous address( if less than 2 years at present address)	Trading style (please tick)
	Solo Trader <input type="checkbox"/> LLP <input type="checkbox"/>
	Partnership <input type="checkbox"/> Other <input type="checkbox"/>
Postcode	Ltd Company <input type="checkbox"/>
Payment Contact Name	Company Reg.No. _____
Accounts Contact Name	VAT reg.No. _____

please supply proof of your address, such a copy of a current utility bill and a sample of your business letter headed paper.

Have any of the principals (directors/partners/trustees or proprietor) been involved in a Liquidation/Bankruptcy/IVA/CVA/Receivership or had any CCJ's registered against them?		No <input type="checkbox"/>	Yes <input type="checkbox"/>
How long have you been established?	Years <input type="checkbox"/>	Months <input type="checkbox"/>	
Last year's annual turnover?	<input type="text"/>		
<b>Payment Method</b>	Cheque <input type="checkbox"/>	Cash <input type="checkbox"/>	Credit Card <input type="checkbox"/> Bank Transfer <input type="checkbox"/>
Will official orders be mandatory?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Is the address mandatory on invoices?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Number of people in company: <input type="text"/>

Names and home addresses of Directors/Partners/Trustees					
Name		Name		Name	
Date of Birth		Date of Birth		Date of Birth	
Address		Address		Address	
Postcode		Postcode		Postcode	
Telephone		Telephone		Telephone	
Email		Email		Email	

**Credit Guarantee - To be completed by the owner//director/company secretary of the company applying for credit.**  
**In consideration of your agreeing to supply goods to the applicant company on credit, we the undersigned being owner/director/company secretary jointly and severally guarantee payment of all the financial obligations to UAX Ltd. and its subsidiaries and successors .**

Signature	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date	<input type="text"/>	<input type="text"/>	<input type="text"/>
Print Name	<input type="text"/>	<input type="text"/>	<input type="text"/>

please read and complete all questions and both page as well before signing the section below

**I/we make this application to open a credit account with UAX Ltd. I/we understand that credit terms are that payment is due within 30 days of the date of invoice and if granted credit, I/we agree to pay in accordance with Terms of Product supply. I/we acknowledge and accept the UAX Ltd. Terms and Condition of Sale/Terms of Product Supply**

<b>Credit Limit Required</b>	<input type="text"/>	Date	<input type="text"/>
Signature of Applicant	<input type="text"/>	Print Name	<input type="text"/>

Names and addresses of two Trade references			
Name	_____	Name	_____
Credit Limit	_____	Credit Limit	_____
Address	_____	Address	_____
	_____		_____
	_____		_____
Postcode	_____	Postcode	_____
Telephone	_____	Telephone	_____
Email	_____	Email	_____

Your bank Details - please give us full details of your main account			
Bank name	_____	Sort code	_____
Address	_____		
	_____		
	_____	Account number	_____
Postcode	_____		
Please supply the bank name, sort code and Account number for the other accounts			
Bank name	_____	Sort code	_____
		Account number	_____
Bank name	_____	Sort code	_____
		Account number	_____

24/7 online services for retailers, buyers...			
Would you like to register for free UAX B2B online shop services?			
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
		Not yet	<input type="checkbox"/>
Name(if different from purchasing contact)	_____		
Email	_____		
Position	_____		
Telephone	_____		

**Data Protection Act - Your Information:** From time to time we may make portions of our mailing list available to carefully selected organizations whose products may be of interest to you. If you would prefer not to receive such mailings please tick this box

**Data Protection/Money Laundering Act - Credit and Fraud Prevention Agencies:**  
 Before granting credit and in adherence to the money laundering laws as well as detecting fraud and confirming identity we may periodically search the files of credit reference agencies and keep a record of that search. We may share details with credit reference agencies and others organizations involved in the detection and prevention of fraud or money laundering. If we are aware or suspect fraud we will record this. It may also be used for tracing and claim assessment. Information held about you by the Credit Reference Agencies may already be linked to records relating to one or more of your partners. For the purposes of this application you may be treated as financially linked and your application will be assessed with reference to any associated records. You have the rights of access to your personal records held by credit and fraud agencies.

**Return your completed application form by post to:**  
**UAX Ltd.; PO BOX 156, Highlane, Stockport SK6 8WN**

**If you have any queries regarding your applications or request more info, please do not hesitate to contact us [jarek@fishwithoutmeat.com](mailto:jarek@fishwithoutmeat.com)**