



## Credit Account Application

Please print out and complete this form and the bank mandate in ink and then send them to your local HRP Service Centre for processing.

You local HRP Service Centre address can be found on the HRP web site at <http://www.hrponline.co.uk/hrp/FindUs.jsp>

## Important Notice - Data Protection

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We will use the information collected on this form to register your account, for our internal record keeping, to administer promotional schemes and to assess your credit worthiness, which may involve passing the information to credit reference agencies and receiving information from them about you.

If we do use the information to make a search with a credit reference agency, that agency will keep a record of that search and will share that information with other businesses. We may also make enquiries about the principal directors, partners and proprietors with the credit reference agency.

We will monitor and record information relating to your trade performance and such records will be made available to credit reference agencies, who will share that information with other businesses in assessing applications for credit and fraud prevention.

From time to time, the HRP Group may like to send you details of products and services which may be of interest to you.

If you would rather not receive information from the HRP Group then please tick here.

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### Application for a Credit Account - Guidance Notes

All credit account applications need to be completed in black ink and the original submitted to your local HRP Service Centre Manager. Facsimile signatures are not accepted by the banks as your authority to release a status report to third parties. Applications that are incorrect or incomplete will be delayed, so please read these guidelines carefully before completing the application.

Please read, sign and retain a copy of the Terms and Conditions of Sale for your own records.

**Section 1** Must be completed by All Applicants.

#### Section 2

- Must be completed by sole traders and partnerships.
- Please supply previous addresses for all applicants, who have not lived at their current addresses for 3 years or more.
- Please supply dates of birth for all applicants.
- All sole traders/partnership applicants are required to provide suitable evidence of their home addresses ie. current utility bill, bank or building society statement or credit card statement.

#### All Applicants

- For Limited/LLP and plc a Director or Company Secretary will need to sign the application.
- For sole traders, the owner of the account needs to sign.
- For partnerships, all partners need to sign.

**Section 3** Must be completed by All Applicants.

**Section 4** Must be completed by All Applicants.

**Section 5** Must be completed by Limited/LLP and plc companies only.

**Section 6** Please DO NOT complete this section - HRP/3D Service Centre use only.

**Section 7** Please DO NOT complete this section - HRP/3D Head Office use only.

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Thank you for reading these notes and for submitting your completed application form together with suitable proof of your address, which should be returned to your Local HRP Service Centre.

**These notes are designed to assist you and prevent delays in processing your application.**

**SECTION 1 - TO BE COMPLETED BY ALL APPLICANTS**

**Full Name and Trading Title** In all cases please attach a sheet of your company's letterhead paper

[Redacted]

**Full Trading Address:**

House Name/No:	[Redacted]	Telephone No:	[Redacted]
Address Line 1:	[Redacted]	Mobile No:	[Redacted]
Address Line 2:	[Redacted]	Fax No:	[Redacted]
Post Town:	[Redacted]	Email Address:	[Redacted]
County:	[Redacted]	Web Site:	[Redacted]
Post Code:	[Redacted]		

**Address if different for Invoices / Statements**

[Redacted]

**SECTION 2 - TO BE COMPLETED BY SOLE TRADER AND PARTNERSHIPS ONLY**

All sole traders/partnership applicants are required to provide suitable evidence of their home addresses ie. current utility bill, bank or building society statement or credit card statement.

Are you a Sole Trader? Y/N [Redacted]

Are you a Partnership? Y/N [Redacted]

**Name and home address of sole trader and/or all partners.**

Name:	[Redacted]	Name:	[Redacted]
Address:	[Redacted]	Address:	[Redacted]
	[Redacted]		[Redacted]
	[Redacted]		[Redacted]
Post Code:	[Redacted]	Post Code:	[Redacted]
Date of Birth*	[Redacted]	Date of Birth*	[Redacted]
Name:	[Redacted]	Name:	[Redacted]
Address:	[Redacted]	Address:	[Redacted]
	[Redacted]		[Redacted]
	[Redacted]		[Redacted]
Post Code:	[Redacted]	Post Code:	[Redacted]
Date of Birth*	[Redacted]	Date of Birth*	[Redacted]

**If less than three years at current address please provide previous address details.**

[Redacted]	[Redacted]
[Redacted]	[Redacted]
[Redacted]	[Redacted]
[Redacted]	[Redacted]

**ALL APPLICANTS**

In making this application, I/We acknowledge and accept the Terms & Conditions of Sale contained above which govern all transactions.

Customer's Signature:	Please print name:	Position in Company:
[Redacted]	[Redacted]	[Redacted]
Customer's Signature:	Please print name:	Position in Company:
[Redacted]	[Redacted]	[Redacted]
Customer's Signature:	Please print name:	Position in Company:
[Redacted]	[Redacted]	[Redacted]
Customer's Signature:	Please print name:	Position in Company:
[Redacted]	[Redacted]	[Redacted]

Date of Application:  
[Redacted]

\*This detail must be completed otherwise your application will not be processed.

I/we under the provision of the Data Protection Act 1988 authorise you to provide a status report to HRP Holdings Ltd., Rougham Industrial Estate, Bury St Edmunds IP30 9XA on my/our behalf.

**SECTION 3 - TO BE COMPLETED BY ALL APPLICANTS**

**Bank Details**

Bank Name:	<input type="text"/>	Account No:	<input type="text"/>
Bank Address:	<input type="text"/>	Account Name:	<input type="text"/>
	<input type="text"/>	Signature:	<input type="text"/>
Sort Code:	<input type="text"/>	Full Name:	<input type="text"/>

**SECTION 4 - TO BE COMPLETED BY ALL APPLICANTS**

<b>Business Activity</b>	<input type="text"/>	<b>Number of Employees</b>	<input type="text"/>
Number of Years Trading:	Anticipated Monthly Turnover	Have you held an Account with any HRP Company before? Y/N	<input type="text"/>
<input type="text"/>	£ <input type="text"/>	If so, under what name	<input type="text"/>
Sales for previous financial year:	£ <input type="text"/>	Please provide account no where known	<input type="text"/>
Pre tax profit for previous financial year:	£ <input type="text"/>		

**SECTION 5 - LIMITED AND PUBLIC COMPANIES ONLY**

Company Registration Number:	<input type="text"/>	Holding Company:	<input type="text"/>
Incorporation Date:	<input type="text"/>	Incorporation Date:	<input type="text"/>
Registered Office if different to trading address:			
<input type="text"/>			
<input type="text"/>			

**SECTION 6 - TO BE COMPLETED BY HRP/3D SERVICE CENTRE ONLY**

Service Centre Location:	<input type="text"/>
Service Centre Manager's Comments:	<input type="text"/>
	<input type="text"/>
Credit Limit Required	<input type="text"/>
Service Centre Manager's Signature/Name:	<input type="text"/>
	Date: <input type="text"/>
Account Targeted Y/N <input type="text"/>	Account Sub Area <input type="text"/>

**SECTION 7 - TO BE COMPLETED BY HRP/3D HEAD OFFICE ONLY**

Account Number: <input type="text"/>	Limit Approved: £ <input type="text"/>	Date: <input type="text"/>
Comments:		
<input type="text"/>		

Authorised Signature:

**PLEASE RETURN ALL COMPLETED SECTIONS TO YOUR LOCAL SERVICE CENTRE**

**STATUS ENQUIRY MANDATE**

To: The Manager .....  
.....Bank  
.....  
.....

Post Code: .....

Sort Code:.....

Re: Account Number: .....  
Account Name: .....  
Monthly Credit Requirement: .....

**CONSENT**

I/We, under the provisions of the Data Protection Act 1998, authorise you to provide a status report to HRP Limited, Rougham Industrial Estate, Bury St. Edmunds, Suffolk IP30 9XA on my/our company:

Signed: .....

Full Name: .....

For and on behalf of: .....  
.....  
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