

Account Application Form

BACA Workwear & Safety BANK DETAILS

Bank: Barclays

Sort Code: 20-61-69

Account No.: 70282553

Fill in form by clicking in the box or print in capital letters.

General Conditions of Sale are available on-line:

<https://www.bacasafety.com/media/1490/baca-workwear-safety-general-conditions-of-sale-2021.pdf>

| | | | |
|--|---|--|-----------------|
| Trading Name | | | |
| Trading Address | | | Postcode |
| | | | |
| Phone No. | | Fax No. | |
| E-mail | | Website | |
| Business Type | <input type="checkbox"/> Sole Trader <input type="checkbox"/> Partnership <input type="checkbox"/> Ltd Co <input type="checkbox"/> Plc | | |
| Credit Limit Required | £ | | |
| Invoice Name & Address (if different from trading address) | | | Postcode |
| | | | |
| Company Registration No. | | VAT Registration No. | |
| Purchasing Contact | | E-mail | |
| Finance Director | | E-mail | |
| Accounts Contact | | E-mail | |
| Accounts Phone No. | | | |
| Email Address to receive BACA Invoices | | | |
| Do you raise Purchase Orders? | <input type="checkbox"/> Yes <input type="checkbox"/> No | For security purposes please detail any standard PO format | e.g. ABC/123456 |
| Accept Part Despatches? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Payment Method | <input type="checkbox"/> BACS (or equivalent direct bank transfer) <input type="checkbox"/> Direct Debit | | |
| Registered Office Name & Address | | | Postcode |
| | | | |

It is important we receive a remittance advice for payments. Please email to: accounts@bacasafety.co.uk

I confirm that I am authorised to sign this form and that I have read and agree to your General Conditions of Sale.

Position: Date:

Signed: Print name: Print name:

Registered Office:

BACA Workwear & Safety Ltd
Clayfield Close, Moulton Park,
Northampton, NN3 6QN

T 01604 499 400
E sales@bacasafety.co.uk
W www.bacasafety.co.uk

 www.linkedin.com/company/baca-safety-ltd

Registered in England & Wales Number: 07035020