

New Account Application Request

Please return this form to us by email to accounts@goldfreeze.co.uk

CUSTOMER DETAILS

Legal Name:	
Trading Name:	
Limit Required:	
Purchasing Contact Details	Finance Contact Details
Contact:	Contact:
Address Line 1:	Address Line 1:
Address Line 2:	Address Line 2:
County:	County:
Post Code:	Post Code:
E-mail:	E-mail:
Tel no:	Tel no:
Fax No:	Fax No:
VAT Reg No:	Company No:
Delivery Address (If different from above)	Invoice Address (If different from above)
Contact:	Contact:
Address Line 1:	Address Line 1:
Address Line 2:	Address Line 2:
County:	County:
Post Code:	Post Code:
E-mail:	E-mail:
Tel no:	Tel no:
Fax No:	Fax No:

Trade Reference 1	Trade Reference 2
Contact:	Contact:
Trading Name:	Trading Name:
Address Line 1:	Address Line 1:
Address Line 2:	Address Line 2:
County:	County:
Post Code:	Post Code:
E-mail:	E-mail:
Tel no:	Tel no:
No of Years:	No of Years:
Form Completed By: Signature:	
Print:	
Position:	
Date:	
Goldfreeze	Ltd Office Use
	Calific Assessment B. Carallia Biol

Credit & Risk		Set Up Approved By Credit & Risk	
References x 2		Position:-	
CH Verification		Date:-	
D&B		Signature:-	
AT Ratio		Print:-	

Please note our terms are 30 days net. To discuss payment terms please contact us on 0845 6434753 or e-mail accounts@goldfreeze.co.uk

Welcome to Goldfreeze Ltd. We Look forward to working with you.

Goldfreeze Ltd, Unit 23, Sleaford Business Park, East Road, Sleaford NG34 7EQ, UK ↓+44 (0)845 643 4753 sales@goldfreeze.co.uk www.goldfreeze.com













