



## Credit Application Form

Complete the details on the form below and email back to: [accounts@cablecrafter.co.uk](mailto:accounts@cablecrafter.co.uk)  
Alternatively you can fax it back to 01582 606063

### Company Details

Name:  \*

Position:  \*

Company Name:  \*

Trading Style:  LTD  LLP  PLC

Company Registration Number:  \*

VAT Registration Number:  \*

Address:  \*

Post Code:  \*

Telephone Number:  \*

Mobile Number:  \*

Fax Number:  \*

Email:  \*

Additional User Name:

Additional User Email:

## Invoice/Delivery Addresses

Delivery Address  
(if different from  
above):

Post Code:

Invoice Address  
(if different from  
above):

Post Code:

## Other Information

Accounts Contact:

Accounts Telephone  
Number:

Accounts Fax  
Number:

Accounts Email:

Credit Limit Request :

Business Type:

Electrical Contractor  Panel Builder  OEM  Wholesaler  
 Other .....

Which company would  
you like to open a credit  
account with?

Birch Valley \*  Krempfast \*

Please provide  
company letterhead  
as proof of address:

(Please attach a copy with your application \*)

I confirm that I am  
authorised to place  
orders on behalf of  
the above company:

\*

I have read and  
accept the Privacy  
Policy and Terms &  
Conditions:

Privacy Policy \*  Terms & Conditions \*



 A CABLECRAFT COMPANY

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