

Storm Building Plastics  
01278 455 326  
accounts@stormbuildingproducts.com



NEW ACCOUNT  
REQUEST FORM

Company Name	
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Invoice Address	
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Contact Number:	
Fax/Email Address	

Company Number (If limited)	
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Number of years trading	
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VAT Number: (If Registered)	
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Accounts Contact Name & Number	
Accounts Email	
Email Address (Invoices Sent)	

Account Request	30 Day Account Please Advise Credit Limit £
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Print Name	
Position	
Signature	
Date	

**Declaration**

*By completing this form, you acknowledge and accept our standard terms and conditions of sale (available on request). Credit terms are strictly 30 days from end of the month.*