

Account Application Form

Company Information

Legal Entity Limited PLC LLP Soletrader Partnership Other

Company Name

Registered Office Address

Invoice Address

Co Registration No:

VAT Reg No:

Proprietor Details (only to be completed by soletraders, partnerships and individuals)

First Applicant Details

Second applicant details

Title Full forename(s)

Title Full forename(s)

Surname DOB

Surname DOB

Permanent Residential Address

Permanent Residential Address

Contact Details

Accounts Contact Name

Tel No

Email

Fax No

Agreement

I agree that Liftright Access Limited are entitled to use the data I have disclosed above for the purposes of obtaining and using consumer credit reports relating to my credit history and/or credit worthiness from any credit reporting agency in connection with the provision of services to the company listed below. I acknowledge and agree that the use of my data by Liftright Access Limited may result in my data being transferred to regulatory authorities (including governmental organisations) and third parties providing products and/or services to the Company and to any other body as required by law.

Signature of authorised person

Date

Print Name

Position within Company

PLEASE INITIAL – I have read and accept the Terms and Conditions as attached

Return form to Fax 01234-741695 or gary@liftrightaccess.co.uk