



**Newmarket Plant Hire Ltd**

Depot Road  
Newmarket, Suffolk  
CB8 0AL

**T:** 01638 663 336

**F:** 01638 663 280

**24 hour call out number:** 07901 982 296

**E:** enquiries@nphgroup.co.uk

**1. LTD / PLC COMPANIES:-**

Full trading title:  
Trading Address:  
Post Code: Tel: Fax:  
Registered Office (if different to above)  
Post Code: Tel: Fax:  
Company registration number: How long established. Yrs: Months:  
If Accounts have not been filed, or if you have been trading for less than 3 years, please provide  
Managing Directors Name:  
Home Address: Post Code:  
Are you part of a group of companies? Yes / No if Yes, please name a parent company:

**2. SOLE TRADER:-**

Full Name: Tel: Fax:  
Address: Post Code:  
If at present address less than 3 years, please give previous address:

**3. PARTNERSHIP:-**

1. Full Name: 2. Full Name  
Home Address: Home Address:  
Post Code: Post Code:  
Tel: Fax: Tel: Fax:  
If either partner at present address less than 5 years, previous address / if business address is different to above please list:  
Address: Post Code:

**4. BANK DETAILS:-**

Bankers Name:  
Address: Post Code:  
Account number: Sort Code:

**5. INSURANCE: Hirer is responsible for loss or damage to plant.**

Please supply a copy of your current insurance certificate covering hired plant.  
**HAE Hireguard Plant Insurance is available – Details available on request**

**6. TRADE REFERENCE:-** One should preferably be from a plant or associated hire company. Please do not use JEWSON or TRAVIS PERKINS

Full trading title: Full trading title:  
Address: Address:  
Post Code: Post Code:  
Tel: Fax: Tel: Fax:

**7. MONTHLY CREDIT YOU REQUIRE:**

**IS A PURCHASE ORDER REQUIRED: Yes / No**

**8. DECLARATION:** I / We declare that the above information is correct and I / we agree to your CPA terms and conditions of trading. I / we authorise you to make enquiries in relation to this account and that I / we accept that you may refuse opening a credit account without giving reason.

Authorised signature: Email address:  
Print Name: Date:

**OFFICE USE ONLY:**

Depot: Limit: Account Number:  
Managers signature: Authorisation signature:  
Date: Date: