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Account Creation Form

We hereby apply to open a credit account with your company and detail below the relevant information. No orders can be logged on the system until the form is filled in and either posted back or Emailed to Accounts@hako.co.uk.

Trading Name/Title:-			
Address:			
	Post Code		
Telephone No:	Fax No		
Email Address:			
Year Established:	Company Reg No		
VAT REG No			
Type of Company:	Sole Trader Partnership PLC Ltd Other		
Please Specify			
Delivery Address:			
	Post Code		
Account Payable:	Contact:		
	Tel: Fax		
	Email Address:		
Credit Required:	Per month		



Authorised Personel	Job Role			
	Full Name			
	Signature			
Authorised Personel	Job Role			
	Full Name			
	Signature			
TERMS AND C	ONDITIONS	3		
Please sign be A copy of whic		ept our standard terms and conditions of trading. our website.		
Delete as appropriate. Yes Account required / No Account required				
14 days from Invoice Date for all new equipment30 days from Invoice Date for Service and Spares.				
Authorised Sig	gnature			
Full Name (Blo	ock)			
Title:				



Date:
