

Second Floor Central House Central Park Industrial Estate Halesowen Road Netherton West Midlands **DY2 9NW Reg Number: 461924 England**

APPLICATION TO OPEN A MONTHLY CREDIT ACCOUNT

In consideration of Cox Hire Ltd agreeing to open a monthly credit account I.....

Being a director of...... Limited ('the Company') agree that all transactions of hire or sale shall be subject to your hire and sale conditions as the case may be operative at the time of any contract and that I will make full settlement of all monies due within one month from the date up to which the account is billed and that the questions have been truly and fully answered. I hereby personally guarantee payment in respect of all sums due from the company to Cox Hire Ltd. Together with all ancillary costs incurred. I have retained a copy of this for my records.

Signature	Date	
PLEASE USE BLOCK CAPITALS		
COMPANY NAME (in full)		
Address	Registered Office	
Post Code	Registered No	
Telephone No	Telephone No	
IS IT A LIMITED COMPANY YES / NO	IF YES FOR HOW LONG YEARS	
HOW MUCH CREDIT IS REQUIRED: £		
NAMES OF ALL DIRECTORS	If <u>NOT</u> a Limited Company – Is the address own house / Council house / rented premises or yard (please circle)	
OR ALL PARTNERS	What is home address	
NATURE OF BUSINESS		
VAT NO	Post Code	
TD ANE D	Mobile Phone No	
TRADE REFERENCES		

TRADE	TRADE	BANKERS	
Name	Name	Name	
Address	Address	Address	
Tel	Tel	Tel	
PLEASE ENSURE THAT YOU ENCLOSE A COPY OF YOUR LETTER HEAD WITH THIS APPLICATION			

In processing your application for credit facilities we may make enquires of credit reference agencies or other third parties who may record those enquiries. We may also disclose information about the conduct of your account with us to credit reference agencies of other third parties. The information obtained from or provided to credit reference agencies or other third parties may be used when assessing further applications for credit terms, for debt collection, for tracing and for fraud prevention.

Signed:....

Date:....



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PLEASE PROVIDE DETAILS OF YOUR HIRED PLANT LEGAL LIABILITY POLICY (IF YOU ARE INTENDING TO HIRE PLANT OR POWERED ACCESS) AND INCLUDE A COPY OF YOUR POLICY WHEN RETURNING THIS APPLICATION

Name of insurer	WE WOULD CONFIRM THAT COVER IS
	MAINTAINED, AND THAT THE LIMIT OF
Policy Number	LIABILITY EXCEEDS THE VALUE OF THE TOTAL
	AMOUNT OF ITEMS ON HIRE AT ANY ONE TIME.
Date of expiry	WE UNDERTAKE TO INFORM COX HIRE IF
	COVER LAPSES.
Signed	

OFF HIRE PROCEDURE

When off hiring equipment, off hires will be accepted in writing, by fax, email or verbal instructions. It is the hires responsibility to ensure that they obtain a off hire reference number from the hire desk when verbally off hiring equipment. When off hiring equipment in writing (to include fax and e-mail) it is the hires responsibility to request both written confirmation confirming acceptance of the off hire and the off hire number.

Company Name:	
Signed	Date
Name (please print)	Position
Counter Signature (Company secretary/director)	Position
Name (please print)	Position

CHECK LIST

- 1. Completed and signed page 1
- 2. Completed and signed page 2
- 3. Enclosed a copy of your insurance policy certificate
- 4. Enclosed a copy of your company letterhead