George Campbell & Sons (Fishmongers) Ltd

Units 3-8 Whitefriars Street, Perth, PH1 1PP

APPLICATION FOR CREDIT

Email to: sales@campbellfish.com

Full Company Name:							
Company Registration	Numbe						
Full trading name: (if di			/e)				
VAT registration no:			-,				
	y pleas	e give nam	es of propri	etors - if a lim	ited comp	any name o	of the major shareholder
PROPRIETORS							
Name:				Name:			
Home Address:			Home Address:				
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Post Code:				Post Code:			
ACCOUNTS INFO							
Contact Name:				Telephone	: :		
Address:							
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(if different from above)					Doct Co.	-1 ₋ .	
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BANK DETAILS					1 050 505	16.	
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TRADE REFERENCES							
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CREDIT LIMIT REQUII	RED: £	,	, <u> </u>				
PAYMENT TERMS: 15	DAYS	AFTER M	ONTH END				
DELIVERIES: MINIMU	JM DRO	OP £50.00					
Customer's signature: _						Da	ate:
On Behalf Of:							
Sales Office: 01738 638		V D.		0.450 Al 14	(:II:-: 077(50 252462	
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DELIVERY DAYS	MON	TUES	e: 07795 480 WED	THURS	FRID	SAT	(OFFICE USE ONLY)