



Please return to:

Caversham Vehicle Hire Ltd  
 19 Ardler Road  
 Caversham  
 Reading  
 Berkshire  
 RG4 5AE

enquiries@cavershamvehiclehire.com

## Account Application Form

In order to approve a Customer Account Application the following information is required. All personal information will be treated in the strictest confidence. Please answer as completely as possible.

<b>Organisation Type:</b> <i>(Please Tick)</i>	Individual / Sole Trader	Partnership	Corporation	School / College / University	Government / Local Government	Charity	Other (specify)
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**Company Name:**

**Trading As Name:** *(If Applicable)*

**Applicant Name & Job Title:**

**Company Registration Number:**

**Date of Incorporation:**

**VAT Number:** *(If Applicable)*

**Charity Number:** *(If Applicable)*

**Physical Location Address:**   
POSTCODE

**Billing Address:**   
POSTCODE

**Registered Office Address:**   
POSTCODE

**Telephone Number:**

**Accounts Payable Email Address:**

If a Corporation: - Do you have a parent company? YES  NO

**If yes, detail full name of Ultimate Controlling Company:**

**Physical Location Address of Ultimate Controlling Company:**

**Principle Director(s) and/or Owner(s) Information**

	Director or Owner	Director or Owner	Director or Owner	Director or Owner
<b>Name</b>				
<b>Title</b>				
<b>Address</b>				
<b>Telephone Number</b>				

**Sole Traders**

<b>Full Name:</b>	
<b>Home Address:</b>	
	POSTCODE
<b>Home Telephone Number:</b>	
<b>Mobile Number:</b>	
<b>Personal Email Address:</b>	
<b>Date of Birth:</b>	
<b>Previous Names:</b>	
<b>Nationality</b>	

**BANK DETAILS**

**Bank Name:**

**Bank Address:**

POSTCODE

**Account Number:**

**Sort Code:**

**FURTHER INFORMATION**

**Number of Employees:**

**Do You Own or Rent Your Building?**      OWN          RENT   

**If Renting, Provide Landlord Name/Address:**

**Landlord Telephone Number:**

<b>Anticipated No. of Vehicle Hires Per Month</b>	<b>Daily Hire</b>	<b>Weekly Hire</b>	<b>Monthly Hire</b>	<b>Other (Specify)</b>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**BUSINESS OR PROFESSIONAL CREDIT REFERENCES**

	Reference 1	Reference 2
<b>Name:</b>		
<b>Address:</b>		
	POSTCODE	POSTCODE
<b>Telephone Number:</b>		
<b>Email Address:</b>		

**AGREEMENTS**

*The information provided within this document is for the purpose of gaining Account Customer status and to obtain credit up to a maximum of 30 days from invoice date. I am duly authorised by the applicant business to enter into this agreement on its behalf. I/We declare that all information provided is true and authorise Caversham Vehicle Hire Ltd to investigate the information given herein pertaining to my/our credit and financial responsibilities.*

*We agree that payment of your invoices will be made strictly in accordance with the credit terms stated thereon. If payments to your account become past the due date it will be placed on stop until full payment of outstanding invoices is made. If payment is not forthcoming after a suitable period, the debt may be passed to a Debt Collection Agency and rely on the Late Payment of Commercial Debts (Interest) Act 1998 and subsequent amendments, extensions, supplements and re-enactments for compensation. In the case of continued/extended hire the vehicle's insurance may be cancelled, the vehicle may have to be returned to Caversham Vehicle Hire Ltd, or may be placed on the stolen list.*

*Applicant's signature attests understanding, financial responsibility, authority, ability and willingness to pay all debts, interest, penalties and administrative costs.*

**SIGNED**

**DATE**

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**OFFICIAL USE**

**Approved By:**

**Date of Approval:**

**Account Number/Reference Assigned:**

**Remarks:**