

# Customer Account Details

	Company Name	_____
D	Address	_____
D		_____
R	Town	_____
E	County	_____
S	Postcode	_____
S	Country if outside UK	_____

C	Office Contact Name	_____
O	Telephone	_____
N	Fax	_____
T	E-Mail	_____
A	Bookkeeper contact	_____
C	Telephone	_____
T	E-Mail	_____

Business Type:

Limited Company     LLC     Partnership     Sole Trader

Trading since (year only) \_\_\_\_\_ Company Registration No \_\_\_\_\_

VAT Registration No (If applicable) \_\_\_\_\_

Preferences for receiving invoices & statements:

Email     Post     Email & Post

Please copy to additional email address \_\_\_\_\_

Any other information : \_\_\_\_\_

The above information is submitted for the sole purpose of operating a credit account with Witheford Equine Ltd and I confirm that the information is be correct to the best of my knowledge.

<b>SIGNED</b>	_____
<b>PRINT NAME</b>	_____
<b>DATE</b>	_____

**THANK YOU FOR COMPLETING! PLEASE FAX BACK TO 01672 811416**

**Witheford Equine Ltd**

Westcourt Stables · Westcourt · Burbage · Nr Marlborough · Wiltshire · SN8 3BW

Office : 01672 811423 · Fax : 01672 811416

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