

### ACCOUNT APPLICATION FORM

(PLEASE USE BLOCK CAPITALS, ALL SECTIONS SHOULD BE COMPLETED AND THE FORM MUST BE SIGNED)

Full Company Name:

VAT Number:  Reg. Number:

Type of Business

Estimated Annual Turnover  No. of Employees:

Credit Limit (if required)

Please note first orders are usually on a payment in advance basis. Where credit is required, approval will be subject to credit insurance being in place. Once approved, payment terms will be 30 days Net. Orders will not be processed until this is in place.

Invoice Address	Delivery Address (if different)
Postcode:	Postcode:
Tel:	Tel:
Fax:	Fax:

Accounts Contact:

Accounts Email:

Accounts Tel:  Fax:

Preferred invoice delivery method: Email:  Fax:  Post:

Send To (i.e. email address/Fax no):

Purchasing Contact  Email:

Design/Eng Contact  Email:

We confirm the above details are correct and that we accept that the General Delivery & Payment terms and conditions of Display Technology Ltd shall apply to all our dealings with Display Technology Limited.

(Terms and conditions can be found on our website [www.displaytechnology.co.uk](http://www.displaytechnology.co.uk))

Name (Print)  Position

Signature  Date: