

Open a Business Credit Account

Account No:

1. Any Password Required? (If yes, please state):

* Having a password on your account means that no one in your organisation will be able to book car with Fairway & Kenwood without the above stated password.

2. Can only authorised personal request for cars?

If yes, please provide the full names of individual(s) below:

3. Must a Reference be taken? (Please tick 1 box):

Yes

No

4. Are you interested in booking cars via our website?

If yes, please provide us user name and password. Password should not be more than 10 characters.

Username:

Password:

5. Would you like to receive your monthly invoice via email?

If yes, please provide your email address.

Email:

6. Would you like to pay Fairway & Kenwood Car Service Via BACS?

Yes

No

If you selected yes, here are our BACS details:

Sort Code: 40-03-11
Account No: 31448323

Please include invoice number on payment as reference.



LICENSED PRIVATE HIRE

Open a Business Credit Account

Company Name:

Trading Address:

Company Reg. No:

Account Contact Name: Tel No:

Please state maximum credit requirements: Per month.

Account facilities are granted at the discretion of the company. Accounts are due and payable 14 days from date of invoice. All accounts are subject to VAT at the current rate.

I am a Director / Partner in the above named company and thereby authorized to obtain credit facilities and to sign cheques on behalf of the said company.

Should the company fail to settle your invoices, for any reason whatsoever, I personally guarantee payment of the outstanding amount.

I understand that in the event of non-payment after 14 days, this account may be suspended and a 15% surcharge added to any outstanding amounts.

I have read and understand your pricing structure and confirm that this is subject to change at your discretion.

In accordance with current legislation I agree not to place bookings with your drivers, but only through the means of your licensed control operation.

My Position In The Company Is:

Printed Name: Date:

(Please Sign):
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