



PEAK OIL PRODUCTS (NORTHERN) LTD

Heating Oils, Lubricants, Farms and Road Fuels

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Shottle Station, Cowers Lane, Belper, Derbyshire DE56 2LG
Telephone: 01773 550400 Fax: 01773 550481

APPLICATION FOR CREDIT FACILITIES FOR SUPPLIES OF PETROLEUM PRODUCTS

DEPOT: REPRESENTATIVE: DATE:

Full/Trading Titles and Address (BLOCK LETTERS)		Parent Company (if known), or Delivery Point and Address if different	
Website:		E-mail:	
Telephone Number:		Fax Number:	

Letter Head attached YES/NO - (if not give reason) _____

Type of Business _____ No. of years established _____

b) If Limited Company give Company Registration Number _____ Annual Turnover _____

c) If not Limited Company please give name/s of proprietors or partners _____

Indicate amount of Credit monthly required	CASH/CHEQUE ON DELIVERY	
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Please state Products required	Product	Monthly Offtake

DIRECT DEBIT ATTACHED ()

BANKERS (full address include Branch name)	CREDIT DEPT. ACTIONED
TRADE REFERENCES (full name address and phone number)	
1)	
2)	

I/We understand and accept the Conditions stated here below:-

CONDITIONS

- 1) We require to receive payment of Account via Direct Debit on the agreed date.
- 2) All invoices are nett and no cash discounts are allowed.
- 3) Your Credit facilities may be withdrawn if your Account exceeds the agreed limit.
- 4) All business transactions are subject to our General Conditions of Sale which are printed on the reverse side of this form.
- 5) If no business is transacted between us for a period of 12 months your Credit facilities may be withdrawn.
- 6) If the applicant is a Limited Company this form must be signed by a Director or the Secretary, or other authorised person.

Signature: NAME:

Position:

Dated:

CREDIT DEPARTMENT USE ONLY

PROPOSAL APPROVED/REJECTED - CREDIT LIMIT _____ TERMS _____

SIGNED: _____ DATE: _____