

# Trade Application Form



Full Trading Name					
Full Trading Address					
Town		Postcode			
Telephone No.		Fax No.			
Email Address		Website			
Name					
Address					
Postcode		Home Phone No.			
Date Incorporated		No. of Employees:			
VAT No.		Company No.			
Sales Rep		Current Turnover			
Type of Business	Service & Repair <input type="checkbox"/>	Distribution <input type="checkbox"/>	Retail/B2B <input type="checkbox"/>	Wholesale <input type="checkbox"/>	Online <input type="checkbox"/>
Purchase Contact Name			Accounts Contact Name		
Telephone No.			Telephone No.		
Fax No.			Fax No.		
Mobile No.			Mobile No.		
Email			Email		

Please provide two current trade references			
Name		Name	
Address		Address	
Telephone No.		Telephone No.	
Fax No.		Fax No.	

**Declaration by applicant:**

I/We understand that the information above will be used by Digital Red Square Ltd. for evaluation purposes and that all the details provided are accurate. I/We also understand that all the information supplied will be treated as confidential. I/We hereby agree that all transactions are conducted in accordance with the terms and conditions of Digital Red Square Ltd.

Signature		Print		Date	
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Office use only:

Approved		Print		Date	
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Please send back this form together with your company registration certificate, VAT certificate and company letterhead.