

Credit Request.

In making this application for credit facilities, we declare that the information below is correct and should we be granted credit we undertake to comply with your agreed credit terms & all cargo will not be insured by Astral Global Logistics Ltd

Full Company Name: _____

Address: _____

Post Code: _____

Tel: _____ Email: _____

Co Reg No: _____

VAT No: _____

Credit Required: £ _____

Days: **30 days (date of invoice)**

The terms agreed on this document exclude customs taxes to which extended terms cannot be applied and immediate payment will be required.

Accounts Department Contact Name/Tel no: _____

Email Address for Invoices/Statements: _____

Bank Details:	
Name:	Account no:
Address:	Sort code:
Post Code:	

Signed:

Name:

Date:

Position: