



Business Activities

BAC: - Sort code

A/c No

Banker's Name & Address

Trade Reference 1 - Please include contact name & telephone number

Trade Reference 2 - Please include contact name & telephone number

Anticipated Amount of Credit Required £

I hereby acknowledge receipt and acceptance of the Terms & Conditions as well as the Inspection Guidelines of Visual Defects in Double Glazed Units of novaglaze gardner & newton Limited.

Signed

Name

Position

Date

Please Fax Back On +44(0)1484 517050