

Salesman:	Territory:	Date:
Account No.	Company Registration No.	

Name of Proprietor <small>(or Company Name if Ltd. Co.)</small>	
Address 1 <small>(or Trading Name if Applicable)</small>	
Address 2	
Address 3	
Town	
County	Post Code
Phone No.	Fax No.
Email for invoice	

Salesman No	Cal	TPD	EMI	SYS	BSD
Major Channel	Minor Channel	TV Region			

Credit Manager	Credit Limit (Requested)	£
Credit Manager Code	Credit Limit (Approved)	£
VAT Code	VAT Rate	VAT Registration No.

Buying Rate	Cal	TPD (1)	EMI	BSD
		SDA (2)	Systems	
Description of Trade:	No. of Branches:			
Special Conditions of Sale:				

Full Name (First, Middle & Surname) and Home Addresses (inc. Post Code) of Owners/Partners/Directors												
1. Date of Birth					2. Date of Birth				3. Date of Birth			
Position:				Position:				Position:				

Bank Details										DD
Name and Address					Account Name					
					Account No.			Sort Code		

Details of Initial Order		
Order No.	Total No. of Units:	Total Order Value: £
Comments		

Approved by Sales Manager	Received by Credit Control	Approved by Credit Manager	Approved by Financial Manager
Date:	Date:	Date:	Date:

Date letter sent to customer:	Date Terms & Conditions returned:
Letter sent by:	Terms & Conditions received by: