BUSINESS INFORMATION

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Business |  | | | |
| In Business Since |  |  | Anticipated Monthly Credit Limit Required |  |
| Telephone |  |  | Vat Reg Number |  |
| Fax |  |  | No. of Employees |  |
| Website |  |  | Type of Business |  |
| Address |  |  | Yearly Budget for AV Products |  |

COMPANY PRINCIPALS RESPONSIBLE FOR BUSINESS TRANSACTIONS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | | Role/Responsibility | Email | Phone |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |

BANK ACCOUNT DETAILS

|  |  |
| --- | --- |
| Name of Bank |  |
| Branch Address |  |
| Account Number |  |
| Sort Code |  |

TRADE REFERENCES

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Company Name | | Contact Name | Email | | Account Open Since |
| 1 |  |  |  | |  |
|  | How do they know you e.g. Distributor/Supplier | | |  | |
| 2 |  |  |  | |  |
|  | How do they know you e.g. Distributor/Supplier | | |  | |

CONFIRMATION OF INFORMATION ACCURACY AND RELEASE OF AUTHORITY TO VERIFY

I hereby confirm that the information in this PARTNER / RESELLER application is correct. The information included in this application is for use by IBT/Softoffice in determining the amount ad conditions to be extended. I understand that IBT/Softoffice may also utilise other sources which it considers necessary in making this determination, further I hereby authorise the bank and trade references listed in this application to release the information necessary to assist IBT/Softoffice in establishing an account.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signature |  | Print Name |  | Date |  |