



Newbridge Auto Parts is a Trading division of JH McLoughlin Ltd, Newbridge, Co Kildare.

If you wish to set up a corporate credit account then please print out this account application form, complete and fax it to us at 045-447294. Corporate accounts can be set up within one working day of receiving your application form.

**Credit Account Application Form:  
Please complete and fax to 045-431244.**

**Your Company Name:** \_\_\_\_\_

Street Name/Address: \_\_\_\_\_

Street Name/Address: \_\_\_\_\_

Street Name/Address: \_\_\_\_\_

Town/City: \_\_\_\_\_

County: \_\_\_\_\_

Country: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Your VAT Number: \_\_\_\_\_

Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ @ \_\_\_\_\_

Your Company Web Site: www. \_\_\_\_\_

Postal Code (If Non-Ireland Republic Then you must Supply a Postal Code & your VAT number)

**Are you a?**  
Sole Trader,  Limited Company  Partnership.  PLC.

Your department: \_\_\_\_\_

Credit Reference (Please supply three references)

1	Tel
2	Tel
3	Tel

**Monthly Credit Amount Required:**

€

**Our Credit Terms:**

Our Account Terms are payment by Direct Debit to your Bank Account on the 20<sup>th</sup> of the Month following the month of Invoice. **Example:** All September Invoices will be collected by DD on the 20<sup>th</sup> of October.

**The following will appear on your Monthly Bank Statement "JHMCLOIL"**

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**Your Order Information**

Does your Company Require a Purchase Order Number to be printed on our invoices. Yes/No. If yes please note that orders will only be processed when an order number is supplied by you.

Yes:

No:

**Comments or Special Instructions**

**Please note the Following.**

This is a Credit Account Application Form, and is not an agreement that J.H. McLoughlin & Co Ltd Trading as Newbridge Auto Parts. will supply product on a Credit Basis. Successful Applicants will be notified by our Credit control department. Should you wish to buy product before this notification you can do so on a C.O.D. basis.

If you have any Special requirements in relation to your account please specify (Eg Invoices to Depot, Statements to Head Office, Order Numbers etc) in writing on a separate sheet of paper and enclose along with this application.

Please note that if Credit facilities are granted, it is important that you adhere to our credit terms. Our Sales order processing is completely computerised, and customer Accounts that are outside of their terms are automatically placed on hold. To obtain delivery before ordering product from us, please make sure your account is not overdue, as we do not give notice of Non delivery to overdue account Holdings.

All Invoices must be settled ( Payment in our head office) by the 20<sup>th</sup> of the month following the month of Invoice. Invoices issued on the 31<sup>st</sup> of March should be settled by the 20th April and invoices issued on the 1<sup>st</sup> May should be settled by the 20<sup>th</sup> of June. Our Company employees are not authorised to agree to any other terms.

**Directors Declaration.**

I have read the above and as a director of this company, do guarantee that payment for all accounts will be received by you, our Supplier, on or before the 20<sup>th</sup> of the month following the month of invoice.

I appreciate that adherence to this obligation is the essence of the Contract between us.

**Signed:** \_\_\_\_\_ **Director:** \_\_\_\_\_

**Note this Form must be signed by a Director of your Company.**

**For our Office use only.**

Message: \_\_\_\_\_  
\_\_\_\_\_

Sales Area: \_\_\_\_\_ Name: \_\_\_\_\_

Account Authorised by: \_\_\_\_\_ Credit Limit Set at: \_\_\_\_\_

Date

Account Number.

**Instructions to your Bank to pay Direct Debits**

Please complete Parts 1 to 4 to instruct your Bank to make payments directly from your Account. Then return the form t:

Our VAX Account Ref Number>

**J.H.McLoughlin Ltd,  
Ballymany, Newbridge, Co Kildare.**

Originator's Identification No.

Originators Reference:

**1. The Manager** \_\_\_\_\_ **bank.**  
Bank Address \_\_\_\_\_

2. Name of Account Holder \_\_\_\_\_

3. Your Bank Sort Code (6 Digit)

Bank Account Code (8 Digit)

***Your Instruction to the Bank and Signature.***

- I instruct you to pay Direct Debits from my account at the request of JH McLoughlin & Co Ltd ( Newbridge).
- The Amounts are variable and may be debited at various dates.
- I understand that JH McLoughlin & Co Ltd Newbridge may change the amounts and dates without giving me prior notice.
- I shall inform the Bank in Writing if I wish to cancel this Instruction.
- I understand that if any Payments are made which breaks the terms of the Instruction, the Bank will make a refund.

Authorised Company Cheque Signatory,

Signature (s): \_\_\_\_\_

Date: \_\_\_\_\_

***Banks may decline to accept Instructions to pay direct Debit from some types of accounts.***