



## NEW CUSTOMER INFORMATION FORM

Legal name: \_\_\_\_\_

Trading name \_\_\_\_\_

Trading address \_\_\_\_\_

Co Reg No \_\_\_\_\_ VAT No \_\_\_\_\_ FGAS Reg \_\_\_\_\_

Landline \_\_\_\_\_ Mobile \_\_\_\_\_ Website \_\_\_\_\_

Business Type (Please tick appropriate box below)

Ltd Co      Sole Trader      Partnership      Subsidiary      Government      Other  
                             

**For Sole Traders & Partners:**

Title	Name	Home Address	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____

Nature of Business \_\_\_\_\_

No of Years in Business \_\_\_\_\_ Premises:    Owned     Leased

Brief detail of desired Purchases \_\_\_\_\_

Initial estimate of monthly Purchases \_\_\_\_\_

Accounts Payable Contact

Title	Name	Direct Number	Email
_____	_____	_____	_____

**PLEASE NOTE THAT FSW OPERATES A PAPERLESS SYSTEM – ALL FORMS ARE SENT ELECTRONICALLY**

Purchasing Department

Title	Name	Direct Number	Email
_____	_____	_____	_____

Do you have a Purchase Order system      YES       NO

Purchase Order system Details \_\_\_\_\_

**PLEASE NOTE THAT TWO PURCHASE ORDER EMAILS MUST BE SENT AT POINT OF ORDER – ONE TO THE SALES DEPARTMENT (OR RELEVANT SALES REP) AND A COPY TO [purchaseorders@fridgespares.ie](mailto:purchaseorders@fridgespares.ie)**

**Please provide Three Trade References**

Company	Contact name	Contact No.	Email
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Payment Method:

Direct Debit  Cheque  Bank Transfer  Debit/Credit Card  Cash

**PLEASE FORWARD ALL PAYMENT / REMITTANCE ADVICES TO [accounts@fridgespares.ie](mailto:accounts@fridgespares.ie)**

Do you wish to be considered for credit facilities? YES  NO

Line of credit sought € \_\_\_\_\_

Payment Terms

**PLEASE NOTE THAT OUR PAYMENT TERMS ARE STRICTLY 30 DAYS FROM STATEMENT DATE. CLAIMS ARISING FROM INVOICE MUST BE MADE WITHIN SEVEN WORKING DAYS FROM INVOICE DATE**

**Declaration**

I confirm the details provided above are correct. I have read a copy of FSW Terms & Conditions (available on our website [www.fridgespareswholesale.ie](http://www.fridgespareswholesale.ie)) which includes a **Retention of Title** clause and agree to adhere to same. I will pay all amounts due on the due date as per our agreement. I/We agree that this information may be used to support a request for credit facilities with you and your associated companies in accordance with their credit vetting facilities.

Signed \_\_\_\_\_ Print name \_\_\_\_\_

Position \_\_\_\_\_ Date \_\_\_\_\_

Are you interested in receiving FSW marketing emails featuring new products & promotions?

YES  NO

**For FSW Office use only**

Proposed by – the person requesting account \_\_\_\_\_

Location: DU1  DU2  CRK

Pricing Structure \_\_\_\_\_

Special Terms and/or Conditions  
\_\_\_\_\_  
\_\_\_\_\_

Approved by \_\_\_\_\_ Date \_\_\_\_\_

