



**Credit Application**

**Company Details**

Company Name		Telephone No.	
Address 1		Fax No.	
Address 2		Company Reg. No.	
Address 3		Company VAT No.	
Address 4		Contact Name	
Postcode		Email Contact	

**Billing Address** (if different from above)

Address 1	
Address 2	
Address 3	
Address 4	
Postcode	

**Trade References**

Company		Company	
Contact Name		Contact Name	
Address 1		Address 1	
Address 2		Address 2	
Address 3		Address 3	
Postcode		Postcode	
Telephone No.		Telephone No.	
Email		Email	

I hereby Authorise OMEGA EXPRESS COURIERS LTD to obtain references from the as and when appropriate. I agreed to abide by the terms and conditions as set out by OMEGA EXPRESS COURIERS LTD, which include that all invoices are due to be paid within 30 days from the date of invoice. I declare I have authority to apply for credit limit of £ \_\_\_\_\_ on behalf of the company.

Signed.....Printed Name.....

Position.....Date.....

**Please complete in full and send it by post to the address below:**

Postal address: Omega Express Couriers Ltd, Unit 26 Icknield Way Farm, Tring Road, Dunstable, LU6 2JX  
 Registered Office, 25 Park Street West, Luton, Bedfordshire, LU1 3BE  
 Registered in England and Wales (Cardiff) under no. 7182991