

# SOANE

BRITAIN

## TRADE APPLICATION

### COMPANY DETAILS (ALL FIELDS ARE MANDATORY)

TRADING NAME .....

INVOICE ADDRESS .....

.....

ZIP CODE ..... STATE .....

CONTACT ..... TELEPHONE N° .....

EMAIL ADDRESS .....

RESALE N° .....

FINANCE CONTACT ..... TELEPHONE N° .....

EMAIL ADDRESS .....

WEBSITE URL ..... INSTAGRAM @ .....

### REFERENCES (2 REQUIRED)

SUPPLIER 1 NAME & ADDRESS .....

.....

CONTACT NAME: ..... TELEPHONE N° .....

EMAIL ADDRESS .....

SUPPLIER 2 NAME & ADDRESS .....

.....

CONTACT NAME: ..... TELEPHONE N° .....

EMAIL ADDRESS .....

HOW DID YOU HEAR ABOUT US? .....

### DECLARATION BY APPLICANT

I/WE CONFIRM THAT THE ABOVE DETAILS ARE CORRECT AND I/WE UNDERTAKE TO ADHERE STRICTLY TO YOUR TERMS AND CONDITIONS OF SALE.

PRINTED NAME ..... POSITION .....

SIGNATURE ..... DATE .....

SOANE ACCOUNT MANAGER	SOANE AUTHORISATION	DATE OF AUTHORISATION
.....	.....	.....

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