

## Trade Cash Account Application Form





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Please complete ALL sections of this form

Business / Acco	ount Holders Details
Name	
Trading Name (if	f different from above)
Address:	
	Post Code:
Registered Office	e Address (if applicable):
Company Reg N	lo:
Telephone No:	Mobile No:
Email Address:	Website:
Please supply two proofs of identity, e.g. photo driver's licence, recent utility bill or passport.	
Previous Addres	s (if less than 3 years):
Trading Style	Please Tick ✓ If Applicable (Must be completed)
_	Partnership Ltd Company
(Please select or	
Description of business, e.g. House Builder General Builder Bricklayer	
	Plumbing & Heating Carpenter / Joiner Civil Engineering
	Landscaping / Paving Electrician Decorator
	Self Build Other, please specify
How did you hear about PGR?	
Customer Signat	ture:
Office use:	Rep. No:
	Date: Proof of address Y/N:
	Owning Branch: Area No:
	Terms to be attached.