**New Supplier Request Form**

**ALONGSIDE THE INFORMATION BELOW PLEASE SUBMIT ANY LETTER HEADED DOCUMENTS FOR OFFICIAL AUTHENTIFICATION AND REFERENCE CHECKS I.E COMPANY INFORMATION AND BANK DETAIL DOCUMENT**

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| **Agency / Company Information** |
| **Agency / Company Name \*** |  |
| **Website**  |  |
| **Postal Address \***  |  |
| **Contact Number \***  |  |
| **Country \*** |  |
| **Company Number** |  |
| **Charity Number** |  |
| **Tax Country**  |  |
| **Organisation Type**  | **Corporation** |  | **Foreign Partnership** |  |
| **Foreign Corporation** |  | **Government Agency** |  |
| **Foreign Government Agency** |  | **Individual** |  |
| **Foreign Individual** |  | **Partnership** |  |
| **Trading Status**  | **PLC** |  | **Other Partnership** |  |
| **LTD** |  | **Other (please state)** |  |
| **Limited Liability Partnership** |  |  |  |
| **VAT Number** |  |
| **Unique Tax Reference** |  |
| **Insurance (please submit a copy of your insurance i.e. public liability or personal indemnity insurance)**  |  |

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| **Contact Information for Communications**  |
| **Name**  |  |
| **Address** |  |
| **Phone Number** |  |
| **Email Address**  |   |
| **Order Site Email** |  |
| **Remittance Email** |  |

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| **Bank Details for Payments – (UK BANK DETAILS)** |
| **Bank Name**  |  |
| **Bank Address / Branch** |  |
| **Account Number**  |  |
| **Sort Code**  |  |
| **Building Society Roll/Ref No: (If applicable)** |  |
| **Payment Terms (**Please be aware that payment terms are set from the invoice received date and are usually 30 days)  |  |