

# H. E. GROUP LIMITED

THE WHITEWALL CENTRE, WHITEWALL ROAD,  
STROOD, KENT ME2 4DZ  
Telephone: 01634 291491 Fax: 09012 010300  
Website: [www.heservices.co.uk](http://www.heservices.co.uk) Email: [mail@heservices.co.uk](mailto:mail@heservices.co.uk)



PLEASE COMPLETE OUTLINED AREAS BELOW, IN BLOCK CAPITALS OR TYPE, AND RETURN TO US WITH A SHEET OF YOUR HEADED PAPER (IF URGENT, SCAN TO [MAIL@HESERVICES.CO.UK](mailto:MAIL@HESERVICES.CO.UK) OR FAX ON 09012 010300 BUT PLEASE POST THE ORIGINAL AS WELL) – THANK YOU.

## CREDIT APPLICATION FORM

Date: / /20

Company Reg. Number:

Full Trading Name:

Invoice Address:

Please state any special requirements when orders are placed (e.g. must have Order Numbers, Order Format, persons entitled to order, etc.):

Landline Phone Number:

Mobile Phone Number:

Fax Number:

VAT Reg. Number.:

Website Address: www.

If you are **not** a Limited Company, please supply the **Full Name, Address and Date of Birth** of Proprietor / Partners.

- |    |        |
|----|--------|
| 1. | D.O.B: |
| 2. | D.O.B: |
| 3. | D.O.B: |

How long have you been trading?

Turnover last year (approx.)  
£

Credit Limit required (overall):  
£

Have any Directors, Shareholders, Partners or Proprietor been involved with any Company that has ceased to trade for any reason?

**YES / NO**  
If yes, please give details on a separate sheet.

What is your type of business?

**Please enclose a copy of your insurance policy schedule in respect of hired in plant**

The Hirer hereby authorises H.E. Group Ltd. to deal direct with and receive payment from the Hirer's relevant insurers, or their agents, in the event of any loss or damage for which the Hirer is insured.

Hire / Purchasing Contact Name

Hire / Purchasing Email Address:

Telephone Number:

Hire / Purchasing Fax No.:

Account Payment Contact Details (if different from the above) :  
NAME:

BANK NAME:

Telephone Number:

SORT CODE:

Email Address:

ACCOUNT NUMBER:

Please provide details of your two **LARGEST, REGULARLY USED SUPPLIERS** (other than plant hire companies) or supply us with two months' worth of statements from each:

**Reference 1**

Supplier:  
Telephone Number:

**Reference 2**

Supplier:  
Telephone Number:

**PLEASE ENSURE THAT EVERY BOX ABOVE IS COMPLETED AND PLEASE SIGN BELOW BEFORE RETURNING TO US – THANK YOU**

I/We, apply for monthly credit facilities with H.E. GROUP LIMITED and all of its subsidiaries/associated companies and agree to settle all accounts to terms. I/We, understand that all hires/purchases are subject to each H.E. GROUP LIMITED company's individual Terms and Conditions of hire/purchase current at the date of order and as displayed on the website. I/We, hereby certify that the information given herein is correct and truthful and give my/our authority for you to obtain credit reference agency checks and voters roll searches as required.  
H.E. GROUP LIMITED and all of its subsidiaries/associated companies take all reasonable steps to ensure that your personal data is processed securely, the data we hold about you will be processed by our staff, no third parties will have access to your personal data unless there is a legal obligation for us to provide them with this.  
Correspondence will only be against this application, however if you would like to opt in to receive full HE Group correspondents then please tick here

Authorised Signatory:	Authorised Signatory:
Print Name:	Print Name:
Position:	Position:

**PERSONAL PAYMENT GUARANTEE – APPLICABLE ONLY TO LIMITED COMPANIES**

In consideration of any H.E. GROUP LIMITED Company providing our company with hire, goods or services, I/We the Director(s)/Company Secretary/Shareholder(s) hereby personally guarantee payment to H.E. GROUP LIMITED of all liabilities arising whether present, future, actual and/or contingent for whatsoever reason to H.E. GROUP LIMITED and not limited to any credit limit applied for or given. I/We agree that our liability under this guarantee shall be joint and several and shall not be impaired or discharged by H.E. GROUP LIMITED giving time or indulgence to our company. I/We understand that to determine this guarantee I/We must give 30 (thirty) days notice in writing, the receipt of which must be acknowledged, to H.E. GROUP LIMITED at the above address and that I/We shall remain responsible for all credit given up to and including the 30<sup>th</sup> day.

<b>Guarantor 1</b>		<b>Guarantor 2</b>		<b>Witness</b>	
Signed: (Director Co. Secretary/Shareholder) Print Name:		Signed: (Director Co. Secretary/Shareholder) Print name:		Signed:  Print Name:	

The Terms and Conditions current at the application date are available on request from us and are displayed on our website and we recommend that you read them prior to applying

Account Ref.:	Co./Depot.Dept:	Source:	Hire/Purchase Date:
Machine Type:		SD or OP:	Hire Period: