



# TRADE ACCOUNT APPLICATION

Please complete in full to prevent delay

Salutation	Miss/Mrs/Mr/Other.....	
Your full name		
Company name	Ltd / Sole Trader / Other.....	
Position in company		
*Email address	*This will be your username and all order confirmations will go to this address.	
Please specify a password to access your account: ..... (all lower case)		
Invoice address	Post Code:	
Delivery address [same as above <input type="checkbox"/> tick here]	Post Code:	
Company website	www.	
Telephone number		
Fax number		
Mobile		
How did you hear about us?		
Circle the title that best describes you:	Kitchen Fitter   Independent Retailer   Manufacturer   DIY store Interior Designer   Property Dev   Builder   Architect Other (please specify):.....	
How often do you buy handles?		
Where do you currently source handles from?		
Please name some magazines or websites you use for sourcing suppliers or information.		
Tell us a little bit about your business and what you offer, or any other info that will help us serve you better:		
<b>Office Use Only:</b> Approved..... (Initials) Date Account Activated..... Source.....		

**FAX THIS FORM TO: 0871 5227 437**

OR POST TO:

**TRADEHANDLES.COM, UNIT 1 LENWADE STATION, LENWADE, NORWICH, NR9 5LR**