



Optics for the real world

ACCOUNT APPLICATION - LIMITED COMPANY

Full company name		
Trading address for deliveries		
Registered office (if different)		
Tel:	Fax:	Email:
Invoice address (if different to trading address)		
Name of Managing Director		
Name of Financial Director		
Accounts payment contact		
Date established		
Number of employees		
VAT number		
Trade reference (1): Name of company Name of contact Tel Fax Email		
Trade reference (2): Name of company Name of contact Tel Fax Email		

I apply to open an account with Comar Optics in the name of the above company. I have read Comar Optics Standard Terms of Business on the website and agree that they shall apply to all contracts between us. I confirm that the above details are correct and that I have authority to make this agreement on behalf of the company. All accounts will be paid within terms (30 days).

Signed	Date	Position
.....

FOR OFFICE USE:		
Responses from references:	(1)	
	(2)	
Approved by:	Date:	Notes: