

Tel: 01727 822111 www.kpwaste.co.uk

## ACCOUNT APPLICATION FORM

Please return completed form via email to <u>admin@kpwaste.co.uk</u>

Alternatively you can post it to: KP Waste Company Ltd 60 High Firs Crescent Harpenden AL5 1 NA

	ACC	COUNTS DE	TAILS				
TRADING NAME							
INVOICING ADDRESS							
CONTACT NUMBER			••••••				
EMAIL ADDRESS							
COMPANY REG NO		. VAT REG.	NO				
SITE SIC CODE COMPANY STATUS:	TYPE	 	SITE	INSDUSTRY			
DIRECTORS NAME/S	:						
	SITE DETAILS						
SITE NAME			<del></del>				
SITE ADDRESS							
			SITE	INSDUSTRY			
SITE SIC CODE SITE CONTACT NUM	TYPE	••••					
SITE EMAIL ADDRESS							
CREDIT LIMIT REQU	TRED £						

	Container	(Please tick)		bins required	empties per	
				on site	week	
	1100 litre container 1100 litre container 1100 litre container	General Waste Cardboard Paper				
	660 litre container 660 litre container 660 litre container	General Waste Cardboard Paper				
	240 litre	Glass				
	FELS	Cardboard General Waste				
	Roll on Roll off					l
	Skips					
	advise whether your bin will reschedule for anothe	r day – please no Ye	em te, d	ptying on other batter properties on local by bin is accessible	on bank holidays	be the next day
			No,	please reschedule	my empty	
		<u>PAYMENT</u>	TE	<u>ERMS</u>		
Payment strictl	y within 30 days from da	ate of invoice – ar	ny q	ueries need to be	raised within 14 d	ays of invoice
	nsfer to: NatWest Bank. All prices quoted are subj		332	46378 Sort Code	60-10-07	
I, the undersigned	have and read, understoo	od and completed	l the	above account fo	rm.	
Name						
Signed		. <b>.</b>				
Dated						

**Waste Stream** 

Number of

Number of