

Company name	
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Main contact	
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Registered address

Line 1	
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Line 2	
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Town/city		Postcode	
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Trading address

Line 1	
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Line 2	
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Town/city		Postcode	
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Tel. number		Fax number	
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E-mail address	
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Preferred method of correspondence	<table border="0"> <tr> <td style="background-color: #0056b3; color: white; padding: 2px;">Email</td> <td style="padding: 2px;"><input type="checkbox"/></td> <td style="background-color: #0056b3; color: white; padding: 2px;">Fax</td> <td style="padding: 2px;"><input type="checkbox"/></td> </tr> </table>	Email	<input type="checkbox"/>	Fax	<input type="checkbox"/>
Email	<input type="checkbox"/>	Fax	<input type="checkbox"/>		

Please include the following documents

(We will be unable to open the account without these)

1. Certificate of incorporation (for Limited Companies)
2. VAT Registration Certificate
3. Letter of introduction
4. Waste Carrier Certificate (where applicable)
5. Scrap Licence (where applicable)

Accounts

Company Registration No.	
Please attach copy of certificate	

VAT Registration No.	
Please attach copy of certificate	

Preferred method of payment	<table border="0"> <tr> <td style="background-color: #0056b3; color: white; padding: 2px;">BACS</td> <td style="padding: 2px;"><input type="checkbox"/></td> <td style="background-color: #0056b3; color: white; padding: 2px;">Cheque</td> <td style="padding: 2px;"><input type="checkbox"/></td> </tr> </table>	BACS	<input type="checkbox"/>	Cheque	<input type="checkbox"/>
BACS	<input type="checkbox"/>	Cheque	<input type="checkbox"/>		
Please note that a payment can only be made on receipt of an invoice					

Bank Name	
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Address	
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Town / City	
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County	
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Postcode	
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Sort code	
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Account No.	
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Environmental

Waste Carriers Licence No.	
	Please attach copy of certificate

Waste Management Permit / Exemption Ref.	
	Please attach copy of certificate

SIC Code	
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Do you have an environmental management system in place?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If so, is the system certified to ISO 14001:2004?	
	Please attach copy of certificate

Quality Management

Do you have a quality management system in place such as ISO 9001?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If so, is the system certified to ISO 9001:2008 and who was the certifying body?	
	Please attach copy of certificate

Health & Safety

Do you have a Health & Safety management system in place?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If so, is the system certified to OHSAS 18001:2007?	
	Please attach copy of certificate

Information Security Management

Do you operate to ISO 27001 Information Security Management Standard?	
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Signed		Date	
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Internal use only:

Agreed payment terms	
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