



Account Application

Please complete form and submit with a copy of your headed paper to Casa Luiza Ltd at the address below:

Company Name: _____

Address: _____

Tel: _____ EORI: _____

Buyer: _____ Mob: _____

Accountant: _____ Email: _____

Statement Address: _____

Website Address: _____

Bank Reference

Bank Name: _____

Account No: _____ Sort Code: _____

Address: _____

Business Details

Type of business: _____ VAT No: _____

Business Structure: Ltd Company Partnership Sole Proprietor PLC

In Business Since: _____

Potential Annual Volume with Colony: _____

Please complete overleaf

Email: info@casaluiza.com



Trade References

Company: _____ **Account No:** _____

Address: _____

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Address: _____

Company: _____ **Account No:** _____

Address: _____

TERMS & CONDITIONS

PRICE LIST IN GBP, VAT EXCLUDED UNLESS SPECIFIED AS RRP PRICE.

FOR ALL SHIPMENTS, PLEASE CONTACT BY EMAIL FOR COSTS & MINIMUM ORDER QUANTITIES.

ANY COMPLAINTS ON ORDERS PLACED SHOULD BE REPORTED WITHIN EIGHT (8) DAYS OF DELIVERY OF THE GOODS.

FABRICS AND WALLCOVERINGS NOT IN STOCK AND BACK ORDERS ARE PAID IN FULL, IN ADVANCE AND ARE NON-REFUNDABLE.

RETURNABLE SAMPLES TO BE RETURNED WITHIN 4 WEEKS OTHERWISE YOU WILL BE INVOICED.

NEW ACCOUNTS WILL BE CHARGED PRO-FORMA ON THE FIRST THREE ORDERS BEFORE A CREDIT ACCOUNT IS ESTABLISHED AND CREDIT APPROVED.

PAYMENT: BANK TRANSFERS TO

Bank: Barclays Bank **Address:** Barclays Leicester, LE87 2BB
Account name: Casa Luiza Ltd
Account number: 83276368 **Sort code:** 20-90-74

I hereby certify that the information given in this credit application is correct and I accept the terms stated by Casa Luiza Ltd. The information included in this credit application is to be used to determine the amount and conditions of credit to be extended. I understand that other sources of credit information considered necessary in making the determination may also be used. I hereby authorize the bank and the trade references listed in this credit application to release the information necessary to assist in establishing a 30 days line of credit.

Signature: _____ **Position:** _____ **Date:** _____

FOR OFFICE USE ONLY: **APPROVED** **NOT APPROVED**