

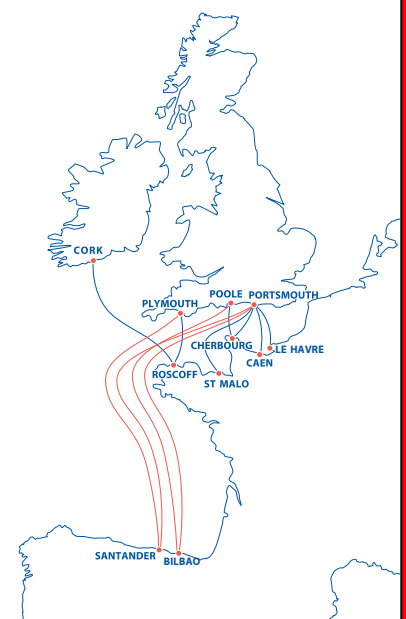


Credit Application

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Direct Debit Forms

Freight Accounts, Brittany Ferries Freight,
New Harbour Road South, POOLE, Dorset, BH15 4AJ
Tel: 0330 159 5002
Email: freight.accounts@brittanyferries.co.uk



CREDIT APPLICATION

In consideration of the facility for the provision of a credit account in respect of carriage and shipping services offered from time to time by BAI SA ("Brittany Ferries Freight")(and its subsidiaries and associated companies from time to time) we whose name, address and details are set out below (The Customer) hereby agree to the terms and conditions of BAI SA.

Account No: BAI SA USE ONLY	Company Name		
Date of application	Trading Style (if different)		
Address:			
Registered Office address (if different)			
Company No.	VAT No.	Date of incorporation	Years in business

Please Note: Brittany Ferries Freight will accept bookings from any person stating that they have the authority to place such bookings on behalf of the Customer and who has knowledge of the account number. It is the sole responsibility of the Customer to inform Brittany Ferries Freight in writing by either registered post, facsimile transmission or e-mail should there be any breach of the Customer's security to the account number and Brittany Ferries Freight will thereafter effect a change on behalf of the Customer. The Customer will, however, remain responsible for the cost of all bookings up to the time of such a change.

Signatures

The undersigned acknowledges this request for credit with BAI SA trading as Brittany Ferries Freight and acknowledges receipt and acceptance of the Terms and Conditions of Carriage.	
1. Director's Signature	Print name in full
2. Director's Signature	Print name in full

Sole trader/Partnership – All parties to sign

Sole Trader/Partner's signature	Print name in full
Address:	
Sole Trader/Partner's signature	Print name in full
Address:	
Sole Trader/Partner's signature	Print name in full
Address:	

Please supply names of regular contacts for Commercial negotiations, Reservations and Accounts.

COMMERCIAL CONTACT

Name:	Position:
Telephone No:	Fax No:
Email Address:	Mobile/Out of Hours:

ACCOUNTS CONTACT

Name:	Position:
Telephone No:	Fax No:
Email Address for Accounts queries:	
Email Address for statements:	
Email Address for invoices	

FERRY RESERVATIONS CONTACTS

	IMPORT	EXPORT
Name:		
Telephone No:		
Fax No:		
Mobile/Out of Hours		
Email Address:		

TRADE REFERENCES

Please supply the name of 2 suppliers (not tyre, fuel or your Bank) whom we can contact for a trade reference.

1. Full company name:	Contact name:
Address:	
Telephone No:	Fax No:
Email:	

2. Full company name:	Contact name:
Address:	
Telephone No:	Fax No:
Email:	

