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www.directskips.co.uk

Please complete this form in BLOCK CAPITALS

Company Name and Address:

Name & Address of Bank/Building Society:

Branch Sort Code:

Account Name:

Declaration:

**I/We authorise you to apply to our bank in
respect of a credit reference about ourselves.**

Signature(s):

_____ **Status:** _____

_____ **Status:** _____

_____ **Status:** _____

Date:

Telephone No:

*NB: This form should be signed by an authorised signatory, eg:
Owner, Partner, Principal Director*