



Contact us 020 8563 8888 | 020 8563 7000 email: info@dialacarlondon.com

CREDIT APPLICATION FORM

Please return by fax to 0208 748 6996 / email bookings@dialacarlondon.com

Main Contact Name: _____

Company Name : _____

Address: _____

Postcode: _____

Telephone: _____ Fax: _____

Email Address: _____

Nature of Business _____

Estimated weekly usage: _____

Amount of Monthly credit required: _____

Authorising - This application must be signed by the Proprietor of the firm applying, or in the case of a Company, by a Director or the Secretary

Forename: _____ Surname: _____

Persons valid to order vehicles: _____

Signature: _____

Payment Terms: 30 days from date of invoice. Overdue accounts subject to a surcharge of 15% per month. I apply to open a Trading Account and agree that all transactions regarding the account will be subject to your Terms of Trade.

Reference

Guarantor

Name: _____ Name: _____

Address: _____ Address: _____

Postcode: _____ Postcode: _____

Telephone: _____ Telephone: _____

Email: _____ Email: _____

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