## **Solo Petroleum Customer Account Application Form**

1. Company Details	Number of Cards Required
Company Name:	
Full Postal Address:	Postcode:
	Tel:
VAT Reg No:	Mobile:
If Sole Trader or Partnership please supply F Please attach addtional Partner details if req	Proprietor/Partner's Full Name(s) and home address(es). quired.
Sole Trader / Partner 1	Sole Trader / Partner 2
Name:	_ Name:
Full Postal Address:	Full Postal Address:
Postcode:	Postcode:
D.O.B:	D.O.B:
☐ Home Owner ☐ Tenant ☐ Other	☐ Home Owner ☐ Tenant ☐ Other
Name of Applicant:	Signature:
Position Held within Company:	Date:
Direct Debit Instruction to your Bank to Pa Please complete this direct Debit instruction including your sign return to us using the freepost reply provided.	y by Direct Debit sature and date. Then simply detach this section, moisteb to seal, fold and
To the Manager:	Bank/Building Society
Full Postal Address:	
Bank Account Name:	
Branch Sort Code:	
Bank/Building Society Account Number:	
Originator's ID Number: 964717 Reference N	lumber:(Office use only)
Guarantee. I understand that this instruction may remain with S	tailed in this instruction subject to the safeguards assured by the Direct Debit Solo Petroleuim and, if so, details will be passed electronically to my accept Direct Debit instructions for some types of account. To be signed in iety.
Signature:	Date: