

NON RECOURSE CLIENT INCREASE CUSTOMER LIMIT FORM

Bibby Operating Office:	
Client Name & Client Code:	

If new Customer is a Limited Company please fill in all details below:

Customer Company Name and Customer Code	Company Registration Number	Limit In Place (£)	Payment Terms	Limit Required £

If new Customer is a Sole Trader / Partnership please fill in all details below:

Customer Company Name	Address and Tel No	Limit In Place (£)	Limit Required £	Payment Terms

In making this application we confirm that we are not aware of any adverse information which may effect your assessment of the risk, nor are we aware of any reason why the customer(s) may not pay.

*By signing the below, you (the client) are agreeing to the above customers having a Non Recourse Limit applied for and accept the charges associated with this.

Client Signature: _____	Date: _____
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