HAWES & SON LTD

PLANT & AUTOMOTIVE

SERVICE
REPAIRS
DIAGNOSTICS
MOBILE ENGINEERING

CASH ACCOUNT FORM

CUSTOMER SETUP / CUSTOMER & BILLING DETAILS

PLEASE COMPLETE & RETURN

Return all pages to enquiries@hawesandson.co.uk. * Required for our setup; other fields where applicable.

1. CUSTOMER / BUSINESS DETAILS

LEGAL BUSINESS NAME / PRIVATE CUSTOMER FULL NAME *

TRADING NAME (IF DIFFERENT)

COMPANY REGISTRATION NO.

☐ Limited company ☐ Sole trader ☐ Partnership ☐ Private customer

CUSTOMER ADDRESS LINE 1 *

ADDRESS LINE 2

TOWN / CITY *

COUNTY / REGION

POSTCODE *

COUNTRY *

2. BILLING ADDRESS

☐ Same as customer address ☐ Different - complete below

BILLING ADDRESSEE / DEPARTMENT

BILLING ADDRESS LINE 1

BILLING ADDRESS LINE 2

TOWN / CITY

COUNTY / REGION

POSTCODE

COUNTRY

Use the legal name of the person or business responsible for paying the invoices.

07507 644985 | 07375 108303
enquiries@hawesandson.co.uk

2 Russel Road, Grays
Essex, RM17 5JX

CASH ACCOUNT FORM

CUSTOMER SETUP / CONTACTS & WORK LOCATION

3. PRIMARY CONTACT - BOOKINGS & JOB UPDATES

FIRST NAME *

LAST NAME *

POSITION / ROLE

MOBILE NUMBER

LANDLINE / TELEPHONE

EMAIL ADDRESS *

Please provide at least one telephone number.

4. INVOICE / ACCOUNTS CONTACT

ACCOUNTS FIRST NAME

ACCOUNTS LAST NAME

INVOICE / STATEMENT EMAIL *

ACCOUNTS TELEPHONE

ADDITIONAL INVOICE RECIPIENT EMAIL (IF REQUIRED)

5. SERVICE REQUIREMENTS

☐ Plant / Bobcat ☐ Automotive ☐ Both

6. MAIN SITE / WORK LOCATION

SITE NAME

SITE CONTACT NAME

SITE TELEPHONE

SITE ADDRESS, POSTCODE & COUNTRY

ACCESS HOURS / SITE INSTRUCTIONS

SITE CONTACT EMAIL

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CASH ACCOUNT FORM

CUSTOMER SETUP / PAYMENT, CONFIRMATION & OFFICE SETUP

7. INVOICE REQUIREMENTS

VAT NUMBER (IF APPLICABLE)

INVOICE CURRENCY (IF NOT GBP)

PURCHASE ORDER / REFERENCE REQUIRED?

☐ Yes ☐ No

PURCHASE ORDER / REFERENCE INSTRUCTIONS

8. CASH ACCOUNT TERMS

CASH ACCOUNT ONLY - NO CREDIT FACILITY

This application is for a CASH ACCOUNT only and does not provide a credit facility. Payment is required in accordance with the payment terms stated on the quotation, job documentation or invoice. Any purchase order or customer reference required for invoicing must be supplied to Hawes & Son Ltd where applicable.

ADDITIONAL SITES, BILLING REQUIREMENTS OR OTHER INFORMATION

9. CUSTOMER CONFIRMATION

I confirm that the information supplied is correct and understand that this account will be operated as a cash account with Hawes & Son Ltd.

NAME *

POSITION

DATE *

FOR HAWES & SON LTD USE - BIGCHANGE / XERO

BIGCHANGE CUSTOMER REF.

CUSTOMER / SYNC GROUP

XERO CONTACT NAME

BC ACCOUNT REF. = XERO ACCOUNT NO.

PAYMENT TERMS / DUE-DATE RULE

INTERNAL NOTES

Office: check existing records, billing contact, VAT/currency and linked account before invoicing.

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