

SOYL ACCOUNT APPLICATION FORM



Please complete this form in BLOCK CAPITALS

SOYL Account Manager

SECTION 1 - TRADING DETAILS (to be completed by all applicants)

Type of account required:

Purchase (Buying from any division of Frontier) Sales (Selling to any division of Frontier) Both

Type of business:

Contractor Distributor Other

Type of business entity:

Sole Trader Any type of Partnership Other - Please specify _____
 Ltd Company. If yes, please supply company registration number _____

Full Trading Title and Head Office address

Trading Title

Address

Post Code

Please give collection or delivery address (if different)

Trading Title

Address

Post Code

VAT Registration No. _____

Crop Assurance details:

Scheme Name _____

Scheme Number _____

SECTION 2 - PARTNER DETAILS (to be completed by all partnerships)

Please give full names and addresses of all partners (if different to above)

Partner 1

Name

Address

Post Code

Partner 2

Name

Address

Post Code

Partner 3

Name

Address

Post Code

Partner 4

Name

Address

Post Code

SECTION 3 - CONTACT DETAILS (to be completed by all applicants)

Main Contact

Contact Name _____
 Landline Telephone _____
 Mobile Telephone _____
 Fax _____
 Email _____

Second Contact

Contact Name _____
 Landline Telephone _____
 Mobile Telephone _____
 Fax _____
 Email _____

SECTION 4 - FARM DETAILS (to be completed by farmers)

Total Farm Ha Tenanted Ha Owned Ha
 Total Arable Crops Ha Total Root /Vegetable Ha Grass Ha

SECTION 5 - HEALTH & SAFETY

Are there any site specific health, safety, security or environmental procedures to be aware of? E.g. crop protection store access, coded access, etc. Please give full details: _____

SECTION 6 - DATA PROTECTION

Please indicate in the tick boxes below if you wish to receive our monthly e-newsletter:

Yes No

If you wish to receive other marketing communications from Frontier Agriculture Ltd. please signify by ticking the relevant box/boxes:

Post Email Phone SMS Fax

SECTION 7 - DECLARATION (to be completed by all applicants)

I/we confirm that the details given are true and complete. If there are any fundamental changes to these details, I/we are obliged to inform Frontier Agriculture Ltd in writing. I/we accept that Frontier Agriculture Ltd will use credit reference agencies who will add details of the search to my/our credit file. I/we accept that Frontier Agriculture Ltd will hold personal data about me and my business.

I being an authorised officer of this business do agree that payment of all accounts will be received by Frontier Agriculture Ltd within its credit terms. I understand that adherence to this obligation is the essence of the contract between us and that failure to comply with these terms may result in credit facilities being withdrawn without notice.

(All partners must sign for joint and several liability)

_____ Name	_____ Signature	_____ Capacity	_____ Date
_____ Name	_____ Signature	_____ Capacity	_____ Date
_____ Name	_____ Signature	_____ Capacity	_____ Date
_____ Name	_____ Signature	_____ Capacity	_____ Date

If you would like to nominate a person to authorise future amendments to your account please specify below

_____ Name	_____ Signature	_____ Capacity	_____ Date
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Please send completed form to: **Address Book Team, Frontier Agriculture Ltd, Camp Road, Witham St Hughs, Lincoln LN6 9TN,** email to **addressbook@frontierag.co.uk**, or fax to **01522 866530**.

SOYL is a division of Frontier Agriculture Ltd.

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