

Credit Facility Enquiry



Attention of Rae Lawless at Goffs, Fax. +353 (0)45 886600

PERSONAL DETAILS:

Full Name:

Address:

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Email:

Telephone: Mobile:.....

Name of Agent/Farm/Stud

VAT Registration No. (TVA/PTVA)
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Estimated Maximum Credit Amount €

Destination of intended purchases

BANK DETAILS:

Name of Bank:.....

Address:.....

Telephone: Fax No:.....

Contact:.....

Account Number:.....Age of Account:.....

I hereby authorise Goffs to carry out a credit enquiry.

Signature:

HISTORY OF TRANSACTIONS WITH GOFFS OVER PAST FIVE YEARS:

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OTHER INFORMATION/COMMENTS.

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All credit enquiries are subject to bank reference checks

CONTACT

COMPLEX

CONDITIONS

NOTICES

BUYER INFORMATION

GENERAL INFORMATION