

# New Client Application Form

v082021

## FOR SMEs

### PLEASE COMPLETE USING BLOCK CAPITALS.

Please return the completed form and any accompanying documents to Jersey Post, Business Support Team, Postal Headquarters, JERSEY, JE1 1AA or [business@jerseypost.com](mailto:business@jerseypost.com)

## 1. Contact Information

Company Name:	
Registered Company Number:	Date of Incorporation:
Country of Incorporation:	
Business Address:	Billing Address (If Different):
Type of Business:	Postcode:
GST no:	Telephone:
Website:	
Email Address:	

## Authorised Signatory

For all Prices and T&C's please refer to our current Postal and Prices Schedule for business account customers which can be found at [www.jerseypost.com](http://www.jerseypost.com).

Signature:	Position:
Print Name:	Date: <input type="text"/> dd / <input type="text"/> mm / <input type="text"/> yy

## 2. Supporting Documents

For non-credit account applications to be considered, please enclose the following with your application:

- Certificate of incorporation
- A utility bill from the last 3 months for the address provided.
- A certified copy of the authorised signatories ID.

### For and on behalf of Jersey Post:

Signature:	Position:
Print Name:	Date: <input type="text"/> dd / <input type="text"/> mm / <input type="text"/> yy

### For official use only

	Date	Initials		Date	Initials		Date	Initials
Received:	<input type="text"/>	<input type="text"/>	References:	<input type="text"/>	<input type="text"/>	Authorisation:	<input type="text"/>	<input type="text"/>
Credit:	<input type="text"/>	<input type="text"/>	Open:	<input type="text"/>	<input type="text"/>			

For further information, please contact the Business Relations Team on 616617 or email [business@jerseypost.com](mailto:business@jerseypost.com)  
[www.jerseypost.com](http://www.jerseypost.com)

