Date: 03/08/2021 **Requisition No:** 000069353



Order Type: NORMAL ORDER Order Number: 300066894 PLEASE QUOTE THE PURCHASE ORDER NUMBER ON ALL CORRESPONDENCE

AND CLICK HERE TO ACKNOWLEDGE RECEIPT

Other Info: **DELIVER TO:** Supplier: Invoice To:

VIAMED LTD

15 STATION ROAD CROSS HILLS

KEIGHLEY

WEST YORKSHIRE

BD20 7DT

Tel No: 01535 634 542

Fax No:

dgt.accountspayable@nhs.net

or

Accounts Payable, Finance Department

Darent Valley Hospital Darenth Wood Road

Dartford Kent DA2 8DA

General Invoice Enquiries to:

Anne Donovan - (07830) 341292

**EBME** 

**Darent Valley Hospital Darenth Wood Road** 

**Dartford** Kent

DA2 8DA

Tel No: 01322 428214 Fax No: 01322 428215 **Requesting Department:** 

EBME (GD1021)

EBME ARE AN ISO 9001 UKAS ACCREDITED DEPARTMENT

Order Requested By: Lesley Allcock

General Info:

Service order

**EBME** 

**General Order Enquiries to:** 

Clare Hewett 01322 428100 x 5398

Line No.	Item ref	Description	Pack / Box Size	Delivery Date:	Quantity Required	Unit Price	Line Value
001		1 x Part Number: 1410000 - V1000, Foetal Heart Simulator @ £ 625.00 each. (PAQ 2040) To be delivered to EBME Department		DEI	1.00	625.00	625.00
002		Carriage. To be delivered to EBME Department			1.00	10.00	10.00

## Conditions of Order

1. Unless specified otherwise, this order is subject to the appropriate NHS Conditions of Contract which will be advised by the Trust on Application or by visiting

https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services

2. All goods must be accompanied by a delivery note quoting the above Purchase Order Number.

3. The above order number must be quoted on all advice notes, delivery notes, correspondence, invoices, acknowledgements, etc.

4. Goods will be received only between 08.00 and 14.00 Monday to Friday.

5. It is a condition of this order that the property and risk of the goods shall lie with the supplier until the goods have been accepted at the specified delivery address as per the contract conditions.

6. Invoices must be sent to the address indicated above/below and must quote the above Purchase Order Number. Invoices not complying with this instruction will be returned to the supplier in accordance w the Trusts 'No Purchase Order, No Pay' policy.

635.00 VAT Excl: 127.00 Total VAT: 762.00 Order Total