

# Able Group

Nationwide services, local to you

Customer Work Agreement / Order Form

Customer Copy



Customer Name:	VIANEO	Date:	7/6/22
Customer Type: Domestic <input checked="" type="checkbox"/> Business <input type="checkbox"/>		Reference no:	4351124
Invoice Address:	Station Rd CROSSHILLS	Site Address:	
Postcode:	BD207EH	Postcode:	

## WORK REQUIRED

## ESTIMATED COSTS OF WORK

Bar Activity	Estimated Price: £	215
	plus VAT @	20 %
	Number of visits:	2
	Additional visits are chargeable	

## RIGHT TO CANCEL

Consumers have a right to cancel this contract within 14 days without giving any reason. The cancellation period will expire 14 days from the day on which you or a third party have taken possession of the goods we are supplying or on conclusion of the contract. To exercise your right to cancel you must inform us at Vialti Ltd t/a Able Group, 39 Progress Road, Leigh on Sea, Essex S59 5PR, 08000 35 34 02, sales@able-group.co.uk of your decision to cancel this contract by a clear statement (e.g. letter by post or email). You may use the cancellation request form on the reverse but it is not obligatory. To meet the cancellation deadline, it is sufficient for you to send your communication concerning your exercise of the right to cancel before the cancellation period has expired.

## REQUEST TO START WORK

I acknowledge my cancellation rights above and below and hereby ask Vialti Ltd t/a Able Group to start work as detailed above and waive my 14-day cancellation cooling off period. I also understand that following cancellation I may have to pay certain labour costs or have some reduction of our reimbursement as described below. In signing below I agree to all terms and conditions as detailed on both sides of this contract.

Signed (Customer): X Caven Date: 7/6/2022

## EFFECTS OF CANCELLATION

If you cancel this contract we will reimburse you all that you have paid us subject to certain possible deductions as set out below.

Once we have delivered the goods you may want us to start work straight away and to do this we will need a specific request from you because of our cancellation period. This will mean you will still have a right to cancel, but:

1. you will have to pay our labour costs for the work that we have done up to the point when you inform us of your decision to cancel.
  2. we may collect or remove any goods that we have installed at your expense.
  3. we will reduce any reimbursement to take account of the loss in value of goods caused by any handling by you.
- We will make the reimbursement without undue delay and not later than 14 days after we received back from you the goods we supplied or, if no goods were supplied or, if there were goods and we offered to collect them, reimbursement will be made 14 days after the day on which we are informed about your decision to cancel this contract. We will make the reimbursement using the same means of payment as you used for the initial transaction unless you have expressly agreed otherwise. In any event, you will not incur any fees as a result of the reimbursement. We may withhold reimbursement until we have received the goods back or you have supplied evidence of having sent back the goods, whichever is the earliest.

## ORDER / DEPOSIT RECEIPT

Goods ordered:	
Total value of goods: £	
Deposit amount paid: £	
Date paid:	
Payment method: Card <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> BACS <input type="checkbox"/>	

24 Hour Nationwide Glaziers, Locksmiths, Plumbers, Electricians, Drainage, Gas, Heating & Pest Control Engineers

Vialti Ltd trading as Able Group  
Registered in England and Wales no. 113955942. Registered Address: Able House, 39 Progress Road, Leigh-on-Sea, Essex S59 5PR  
Vat Registration no. GB 626 6135 43 Customer Service Phone no. 08000 35 34 02 Email: info@able-group.co.uk Web: www.able-group.co.uk

# Able Group

Nationwide services, local to you

Pest Control Customer Work Report / Invoice

Customer Copy



Customer Name:	VIANEO LTD	Date:	7/6/22
Customer Type: Domestic <input type="checkbox"/> Business <input checked="" type="checkbox"/> Account <input type="checkbox"/>		Reference no:	4351124
Invoice Address:	17 STATION RD CROSSHILLS	Site Address:	
Postcode:	BD207EH	Postcode:	

## WORK REPORT

Time work started:	12.00	Time work completed:	12.45
Detail of work completed:	Treatment of rodent bait stations around external doors also placed rat poison baiting traps in flower bed located at front of property. Proofing required to air bricks.		

## TREATMENT DETAILS

Product / Substance and quantity used\*: Difenconer - 1kg.

Location product left / area treated: External flowerbed - external perimeter

\*Further Product/Substance information is available at [www.ablegroup.co.uk/pests/pestservices](http://www.ablegroup.co.uk/pests/pestservices)

## MANDATORY QUESTIONS

Risk assessment used?	Standard <input checked="" type="checkbox"/> Site specific <input type="checkbox"/>	Safety advice given?	N/A <input type="checkbox"/> Yes <input checked="" type="checkbox"/>
COSHH Risk assessment used?	Standard <input checked="" type="checkbox"/> Site specific <input type="checkbox"/>	Safety data sheet given?	N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/>

## NOTES AND RECOMMENDATIONS

Return visit date (if required): 14/6/22

Guarantee: Standard ☐ None ☒ Other ☐ Please specify

See terms and conditions for more information

## PAYMENT METHOD

Card ☐ Cash ☐ Cheque ☐ BACS ☐ Account ☐ payable to "ABLE GROUP"

## INVOICE VALUES

I hereby confirm that I have inspected the work which has been completed. I agree that it has been carried out to a satisfactory standard and acknowledge the terms and conditions on the reverse.	VAT @	%	£
Customer Name:			43
Owner/landlord <input type="checkbox"/> Tenant <input type="checkbox"/> Other <input type="checkbox"/>			
Signature: X Caven Date: 7/6/22	Total	£	258
	Less deposit paid	£	
	Amount due	£	258

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Customer Copy



## Customer Work Agreement / Order Form

Nationwide services, local to you



Customer Copy

Customer Name:

VIA MED

Date: 14/6/22

Customer Type:

Domestic ☐ Business ☒

Reference no: A351124

Invoice Address:

17 Station Rd  
Crosswicks

Site Address:

Postcode: BD207EH

Postcode:

Postcode: BD207EH

### WORK REQUIRED

### ESTIMATED COSTS OF WORK

Estimated Price: £ 215

plus VAT @ 20 %

Number of visits: 2

Additional visits are chargeable

### RIGHT TO CANCEL

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### REQUEST TO START WORK

I acknowledge my cancellation rights above and below and hereby ask Vial Ltd t/a Able Group to start work as detailed above and waive my 14-day cancellation cooling off period. I also understand that following cancellation I may have to pay certain labour costs or have some reduction of our reimbursement as described below. In signing below I agree to all terms and conditions as detailed on both sides of this contract.

Signed (Customer):

C. CARRON

Date: 14/6/22

### EFFECTS OF CANCELLATION

If you cancel this contract we will reimburse you all that you have paid us subject to certain possible deductions as set out below.

Once we have delivered the goods you may want us to start work, straight away and to do this we will need a specific request from you because of our cancellation period: this will mean you will still have a right to cancel, but:

1. you will have to pay our labour costs for the work that we have done up to the point when you inform us of your decision to cancel;

2. we may collect or remove any goods that we have installed at your expense;

3. we will reduce any reimbursement to take account of the loss in value of goods caused by any handling by you.

We will make the reimbursement without undue delay and not later than 14 days after we received back from you the goods we supplied or if no goods were supplied or if there were goods and we offered to collect them; reimbursement will be made 14 days after the day on which we are informed about your decision to cancel this contract. We will make the reimbursement using the same means of payment as you used for the initial transaction unless you have expressly agreed otherwise; in any event, you will not incur any fees as a result of the reimbursement. We may withhold reimbursement until we have received the goods back or you have supplied evidence of having sent back the goods, whichever is the earliest.

### ORDER / DEPOSIT RECEIPT

Goods ordered:

Total value of goods: £

Deposit amount paid: £

Date paid:

Payment method:

Card ☐ Cash ☐ Cheque ☐ BACS ☐

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Customer Copy

Pest Control Customer Work Report / Invoice

Customer Copy

Customer Name: VIA MED

Date: 14/6/22

Customer Type: Domestic ☐ Business ☒ Account ☐

Reference no:

Invoice Address:

17 Station Rd  
Crosswicks

Site Address:

Postcode:

Postcode: BD207EH

Postcode:

### WORK REPORT

Time work started: 13.00

Time work completed: 15.15

Detail of work completed:

Removed all four spiders as no more activity. Bows been from floor and all from a reception

### TREATMENT DETAILS

Product / Substance and quantity used\*:

Location product left / area treated:

\*Further Product/Substance information is available at [www.ablegroup.co.uk/pests/pestservices](http://www.ablegroup.co.uk/pests/pestservices)

### MANDATORY QUESTIONS

Risk assessment used?

Standard ☐ Site specific ☐

Safety advice given?

N/A ☐ Yes ☐

COSHH Risk assessment used?

Standard ☐ Site specific ☐ N/A ☐

Safety data sheet given?

N/A ☐ Yes ☐

Return visit date (if required):

NOTES AND RECOMMENDATIONS

Guarantee: Standard ☐ None ☐ Other ☐

See terms and conditions for more information

### PAYMENT METHOD

Card ☐ Cash ☐ Cheque ☐ BACS ☐ Account ☐ Please make all payments payable to 'ABLE GROUP'

### INVOICE VALUES

Sub-total: £ 215

VAT @ 20 % £ 43

Total: £ 258

Less deposit paid: £ 258

Amount due: £

Amount due: £

Customer Name:

17 Station Rd  
Crosswicks

Owner/Landlord ☐ Tenant ☐ Other ☐

Signature:

C. CARRON

Date: 14/6/22

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