Viamed Ltd
15 Station Road
Cross Hills
Keighley, West Yorkshire
BD20 7DT, United Kingdom
Tel: +44 (0) 1535 634542
Fax: +44 (0) 1535 635582
Email: info@viamed.co.uk
VAT Reg No: GB287389593
Company Reg No: 01291765
Eori No: GB287389593000

Viamed Ltd

Delivery Address

Linde Gas a.s.
U Technoplynu 1324
Praha 9
198 00
Czech Republic

Invoice Address

Linde Gas A.s.
U Technoplynu 1324
Praha 9
198 00
Czech Republic

Contact Name : Tomas Cmiral
Contact Tel : 420731608621

Account CID38019
Customer Reference 20072684KG
Date 20 Jul 2026
Priority 3

Valid until 20 Aug 2026
Priced In Euros

Proforma Invoice MVM164773

CIP Carriage and Insurance Paid To Linde Gas, Czech Republic * Incoterms 2020

Your Viamed Contact for this Proforma Invoice : kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0111265 Tariff 90181990-00 CoO United States	Maxtec UltramaxO2 Oxygen analyser Maxtec R221P11	1	460.00	0.00	460.00
0111266 Tariff 9027.10.6000 CoO United States	Oxygen analyser - Smart Check Ref. MA0236EN	1	460.00	0.00	460.00
INS	Insurance	1	11.50	0.00	11.50
PPUPS6	UPS Courier Delivery - Standard 32 x 24 x 16 cm 1.10 kg	1	18.00	0.00	18.00

Total Net:	949.50
Total Vat:	0.00
Total:	949.50

Banking details	BIC
Bank	Barclays Bank
Sort Code	20-78-42
Account Number	87399700
IBAN	GB33BUKB20784287399700
BIC	BUKBGB22

Terms and conditions https://www.viamed.co.uk/terms

Full proforma amount to be credited to our account net of all bank charges.
Claims: Please claim non delivery within 14 days of invoice.
Shortages or damage within 3 days of receipt.
Claims after these times cannot be entertained.
Title to goods does not pass until payment in full has been received.
Proforma Valid for 30 days only.
Viamed Ltd reserves the right to add an administration
fee to the Proforma if multiple changes are requested.