

Invoice Address
Norfolk and Norwich UH FT
RM1 Payables G105
PO Box 312
Leeds
LS11 1HP

Supplier
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



Contact Name Mike Burton
Contact Tel 01603286286
Account 00003890
Customer Reference 358038920
Date 10 Mar 2025
Tracking Number 1Z9W96386842173676
Priced In UK Pounds

Invoice RVM155428-1

Delivery Address
Norfolk and Norwich University Hospital
Clinical Engineering
Mechanical WV4489
Colney Lane
Norwich
NR4 7UY

CIP Carriage and Insurance Paid To Norfolk Hospital, UK * Incoterms(r) 2020

Delivery Reference DVM155428-1 Contact kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
1410000 Tariff 90318080-00 CoO U.K.	Foetal Heart Simulator V1000 S/N:PR03731A13	1	676.20	135.24	811.44
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386842173676		12.00	2.40	14.40

Total Net: 688.20
Total Vat: 137.64
Total: 825.84

Banking details
Bank Barclays Bank PLC
Sort Code 20-78-42
Account Number 00906662
IBAN GB05BUKB20784200906662
BIC BUKGB22
Terms & conditions <https://www.viamed.co.uk/terms>

Terms: Net 30 days from date of invoice.
Full invoice amount to be credited to our account net of all bank charges.
Claims: Please claim non delivery within 7 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.