

Invoice Address
Hull University Teaching Hospitals
C/O ELFS Business Services
Viscount House Arkwright Court
Commercial Road
Darwen
BB3 0FG

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 Supplies
Contact Tel 01482608783
Account 00001270
Customer Reference RWA263447
Date 09 Jul 2025
Tracking Number 1Z9W96386876884059
Priced In UK Pounds

Invoice RVM157776-1

Delivery Address
Castle Hill Hospital
HUTH Perfusion Department
Entrance 1
Castle Road
Cottingham
HU16 5JQ

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

Delivery Reference DVM157776-1 Contact sophie.lines@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0121351 Tariff 9018199000 CoO Germany PPUPS1	Envitec MySign O Clamp	4	120.60	24.12	578.88
	UPS Courier Delivery - Standard AWB:1Z9W96386876884059		12.00	2.40	14.40

Total Net: 494.40
Total Vat: 98.88
Total: 593.28

Banking details
Bank Barclays Bank PLC
Sort Code 20-78-42
Account Number 00906662
IBAN GB05BUKB20784200906662
BIC BUKBGB22
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.