

Invoice Address
The Newcastle upon Tyne Hospitals NHS FT
Accounts Payable
Level 2 Regent Point
Regent Farm Road
Newcastle Upon Tyne
NE3 3HD

Delivery Address
Dental Hospital
1 910D15 Dental Theatres
28 and 29 Day Unit
Richardson Road
Newcastle Upon Tyne
NE2 4AZ

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 Kirsty Chattaway
Contact Tel 01912336161
Account 00003806
Customer Reference RTDN400517793
Date 08 Aug 2025
Tracking Number 1Z9W96386841688792
Priced In UK Pounds

Invoice RVM158358-1

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

Delivery Reference DVM158358-1 Contact aqib.majeed@viamed.co.uk

Item Reference	Description	Quantity	Unit	Unit Vat	Total
0110023 Tariff 9019209000 CoO Germany	Viamed Oxygen Sensor R-23V S/N:V125572-V125573	2	41.05	8.21	98.52
PPUPS1	UPS Courier Delivery - Standard AWB:1Z9W96386841688792		0.00	0.00	0.00

Total Net: 82.10
Total Vat: 16.42
Total: 98.52

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.