

Your Name and Address (where credit card is registered)

Name: _____

Address: _____

Postcode: _____ Daytime Tel. No. _____

Delivery Address (if different from above)

Name: _____

Address: _____

Postcode: _____ Daytime Tel. No. _____

Page	Product Code	Description	Price	Qty	Total

*Delivery charges apply to UK mainland only. Orders to Scottish Highland, Northern Ireland and all other offshore UK addresses please contact us for carriage details.

Delivery charge inclusive of VAT

Sub Total
£5.99 delivery charge per order*
(free for orders over £35 exc VAT)

TOTAL

I wish to pay by credit card (please tick box)







Credit Card No:

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Valid from:

--	--	--	--	--	--

Expiry Date:

--	--	--	--	--	--

Issue No:

--	--	--

3 Digit Security No (back of card):

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Name on Card _____

Signature: **X** _____

Please make cheques payable to: OTS Limited
Please note that orders sent by cheque will not be processed until the cheque has cleared the banking system.

VAT DECLARATION – If you qualify for VAT zero rating you must complete this section to claim relief from VAT on the goods you are ordering. See price list for details. Goods and Services for disabled persons: Eligibility declaration by an individual

I declare that I am/the person for whom I am buying is chronically sick or disabled by reason of (give full specific description of your condition, eg. Multiple Sclerosis, Stroke, Rheumatoid Arthritis etc.)

and I am receiving from OTS Ltd the goods detailed above which are being supplied to me for domestic or my personal use and claim relief from all Value Added Tax under Group 12 of Schedule 8 of the Value Added Tax Act 1994.

Customer signature: **X** _____ Date: _____

