

Golder Associates (UK) Limited

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ConSim helpdesk E-Mail: consim@golder.com

<http://www.golder.com>

CONSIM RELEASE 2.5**ORDER FORM**

	Licensed Office Details (Required for Database)	Billing Details if different from Licensed Office
Company		
Contact Name		
Address		

Telephone		
Fax		
E-mail		

Please supply me with:

Qty		£
	Copies of ConSim 2.5 (consultancy license) @ £850 +VAT	
	Copies of ConSim 2.5 (regulatory and educational license) @ £425 +VAT	
	Replacement copy of ConSim 2.5 CD or Manual @ £25 + VAT	CD
		Manual
	Discounted Copies of ConSim 2.5 - <i>please contact the helpdesk for a quote if you already hold a license or wish to purchase multiple copies (consim@golder.com)</i>	
VAT @ 17.5%		
Total		

Note: Overseas orders will not be charged VAT but will include a courier or postage charge, provided on receipt of order

If you are a ConSim 2.02 license holder and have not received ConSim 2.5 please contact the helpdesk

**** Please note we only accept payment in advance ****

**** Payment details overleaf ****

Office Use Only:

ACC:

PAID:

INS:

DIS:

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INV NO:

BUYER CODE:

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CONSIM RELEASE 2.5

PAYMENT DETAILS

Payment for ConSim Release 2.5 can be made by three methods:

1. Via **Cheque** made payable to **Golder Associates (UK) Limited**;
2. Via the **BACs electronic transfer system** – details can be provided in a proforma invoice on request; or
3. Via **Credit Card** – Please complete the details below and supply to us, or telephone our accounts department requesting payment of ConSim v2.5.

Credit Card							
VISA	<input type="checkbox"/>	Mastercard	<input type="checkbox"/>	Amex	<input type="checkbox"/>		
Card Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Start Date	<input type="text"/>	/	<input type="text"/>	End Date	<input type="text"/>	/	<input type="text"/>
Security Number	<input type="text"/>	The three digit number on back of card or for Amex the four digit number on the front.					
Name on Card	<input type="text"/>						
Signature	<input type="text"/>	Date	<input type="text"/>				
Address ¹	<input type="text"/>						

¹ Address to which the credit card is registered

**** Please note we only accept payment in advance of releasing software ****

Please complete the full order form and return to Golder Associates at the above address