ORDER FORM

Post to:
SOUTH EAST MOBILITY,
59 Jesmond Road, GRAYS, ESSEX. RM16 2QS

(Tel: 0845 644 2892) (Fax: 01375 405861)

Mr/Mrs/Miss/Ms_____
Address:_____

Daytime tel No:_____
Date:_____

Signature:_____

Declaration For Relief From VAT

I am chronically sick or disabled (as defined below) and I am receiving from Sou th East Mobility/Mobility Abroad Ltd the goods on this order form, which are for my personal use. I claim that the supply of these goods is eligible for relief from VAT under the VAT Act 1983.

Insert details of your chronic sickness of disability below. No te: There are severe penalties for making a false declaration

_____

Signature:_____

Product Code	Quantity	Description	Unit Price	Total Price

Please make cheques Payable to: Mobility Abroad Ltd
Credit/Debit Card: Visa/MasterCard/Switch/

Expiry Date: / Name:
Month/Year
SIGNED: Issue Nr:

Sub Total	
Delivery**	
VAT @17.5% ***	
TOTAL	

** Delivery charged at £3.95 per order. Wheelchairs and scooters delivery free of charge.
*** If you qualify for VAT exemption please complete the declaration at the top of this Order Form, if not completed or you do not qualify please add VAT to this order.

South East Mobility is a Marketing name division of Mobility Abroad Ltd
Email:enquiries@southeastmobility.co.uk web sitewww.southeastmobility.co.uk

Thank you for your order