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## PCN REGISTERED UPDATE SCHEME SUBSCRIPTION

The British Institute of NDT offers the means for companies to ensure that all PCN documentation held by them is current. Your company can register and automatically receive all new PCN documents and amendments to existing documents on a quarterly basis.

The obvious saving in time, and the security of knowledge that your documentation is up to date, makes this service indispensable to the quality conscious company for an annual fee (see document reference PSL/35 – certification services fees).

In order to register for the scheme please complete and return the attached form together with the current fee or your company order to the address at the top of the page. Individuals or companies subscribing will receive all new issues and amendments of PCN documents listed in control document reference PSL/8A on a quarterly basis.

PCN UPDATE SCHEME
APPLICATION FORM (PSL/8D)
Company name:
Email address
Postal address:
Tel:
Email:
Main contact:
Position:
Date:
Signature:

By completing and submitting this application form you are agreeing to subscribe to the PCN Registered Update Scheme for a period of one year. Please enclose the current the current annual fee or company order and send with the completed application to the above address.

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## PAYMENT

There is a charge for the issue of a duplicate certificate and ID cards details of which are published in PSL/35, which also describes methods of payment. Please forward completed application form and fee to the above address.

Are you VAT registered?	
Please provide VAT Number.	

## Payment type if not paying by card (please tick & complete as appropriate)

Cheque	Bank	Transfer	Purchase	Order
Enclosed?	(BACS)		Number	

Credit/Debit Card (provide details below)								
Please tick the appropriate boxes:								
For payment by credit		sa				Amex	Switch	
card (tick relevant box):	Visa			MasterCard			Issue	
							No.	
Corporate/ company card					Personal	Card		
Name as shown on the card								
Card Number								
Signature of above named individual:								
Security code: (Last 3 digits on the security strip on reverse of the card)								
Card valid from:								
Card expiry:								
Billing address: (Address the invoice will be sent to, if Corporate card then address of company and name of whom the invoice should be sent to)								
Please debit the above credit/debit card for the amount shown (applicants must enter the correct amount, which can be ascertained from document PSL/35):			£	(ir	ncluding VA	AT)		