PCN REGISTERED UPDATE SCHEME – RENEWAL NOTICE

Your subscription in respect of the above scheme was/is [delete as appropriate] due for renewal on [date].

In order to renew your subscription to the scheme please complete and submit the attached form to BINDT together with the current fee or your company order.

Applications should be posted or emailed to;
PCN Certification Records Office, Newton Building, St. Georges Avenue, Northampton, NN2 6JB, United Kingdom. pcn@bindt.org.
(see document reference PSL/35 – certification services fees).

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**PCN UPDATE SCHEME**

**RENEWAL FORM (PSL/8D/2)**

<table>
<thead>
<tr>
<th>Company name:</th>
<th></th>
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<tbody>
<tr>
<td>Email address:</td>
<td></td>
</tr>
<tr>
<td>Postal address:</td>
<td></td>
</tr>
<tr>
<td>Tel:</td>
<td>Fax:</td>
</tr>
<tr>
<td>Main contact:</td>
<td>Position:</td>
</tr>
<tr>
<td>Signature:</td>
<td>Date:</td>
</tr>
</tbody>
</table>

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

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**FOR BINDT USE ONLY**

| Date received: | Registration date: |
| Invoice number: | Expiry date: |
| Date invoice paid: | Date database updated: |

Remarks

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The British Institute of Non-Destructive Testing is an accredited certification body offering personnel and quality management systems assessment and certification against criteria set out in international and European standards through the PCN Certification Scheme.
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)

<table>
<thead>
<tr>
<th>Cheque Enclosed?</th>
<th>Bank Transfer (BACS)</th>
<th>Purchase Order Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

Credit/Debit Card (provide details below)

Please tick the appropriate boxes:

For payment by credit card (tick relevant box):
- Visa
- MasterCard
- Amex
- Switch
  - 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):

£ : (including VAT)