

## Subcontractor Verification Request Form



To be forwarded to the Accounts Department upon completion

### Section 1: Company Details

Name of Organisation / Company:

Trade / Service Provided:

Approved by either CHAS/Constructionline/ECL H&S - **Copy of certification to be attached**

Address:

Postcode:

Telephone Number:

Fax Number:

E-mail Address (For Remit):

Name of Key Contact:

Trading Status:

Company Registration No. (If applicable)

National Insurance No (if Sole Trader or Partnership)

Public Liability Insurance (If employing more than 1 person)

Employers Liability Insurance (If employing more than 1 person)

CSCS Reg Number

## Subcontractor Verification Request Form



### Section 2: Finance Details

Name of Bank:	
Address:	
Postcode:	
Account No:	
Sort Code:	
VAT Registration No.	
UTR No. / CIS Status	

### PARTNERSHIPS ONLY

Partnership UTR No.	
Registered Partners UTR No.	
Registered Partners NI No.	
Both Partners Names.	

### **Office Use Only**

### Section 3: QS Details to Fill in

QS Requiring Subcontractor Set-up.	<a href="mailto:james@cgsnortheastltd.co.uk">james@cgsnortheastltd.co.uk</a>
QS Signature.	
Date Requested to be Set-up.	

### Section 4: Accounts Use Only

Does Account Already Exist.	
Customer Code.	
Person Making Changes on Sage.	
Date Added to Sage.	
Confirmed CIS Status/Verification No.	