

QTS checks FOR EMPLOYERS ONLY



APCS

Access Personal Checking Services
Derwent House, Alexandra Road,
Wallasey, CH45 0JZ
Tel: 0845 643 1145
Fax: 0845 643 1146
Email: enquiries@accesspcs.co.uk

1	<u>How many QTS checks do you require?</u>	Enter Quantity <input style="width: 40px; height: 20px;" type="text"/>	@ £12.00 inc vat (each)
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2	<u>Total cost of your order</u>	£ <input style="width: 40px; height: 20px;" type="text"/>	.00
Please calculate the total of your order and place the amount in the box		All prices quoted are fully inclusive of VAT and include all other fees.	
We will supply a VAT receipt via email upon the return of QTS check results.			

3	<u>Payment</u> Can be made by debit/credit card, by completing the details below or contacting us (see above). We do not accept American Express.																				
	Card Type: (Please circle)	Visa	Mastercard	Switch	Discover	Solo															
	Card Number <small>(16 digit number)</small>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td><td style="width: 40px;"> </td> </tr> </table>																			Issue Number <small>(switch card only)</small>
	Valid from date	<table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"> <tr><td style="width: 20px;"> </td><td style="width: 20px;"> </td></tr> </table>			/	<table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"> <tr><td style="width: 20px;"> </td><td style="width: 20px;"> </td></tr> </table>			Valid to date	<table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"> <tr><td style="width: 20px;"> </td><td style="width: 20px;"> </td></tr> </table>			/	<table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"> <tr><td style="width: 20px;"> </td><td style="width: 20px;"> </td></tr> </table>			<table border="1" style="width: 40px; height: 20px; border-collapse: collapse;"> <tr><td style="width: 20px;"> </td><td style="width: 20px;"> </td></tr> </table>				
	Please Note that not all cards have a valid from date and/or to date.																				
	Security Code - 3 digits on signature strip				<table border="1" style="width: 60px; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> </table>																
I hereby authorise the stated amount to be collected from my card account						Signed: <input style="width: 100px; height: 20px;" type="text"/>															

4	<u>Your Contact Details:-</u>
	Email address to send the QTS check results to is: _____
	Company or Business Name: _____
	Full Contact Name: _____
	Full Company/Business Address (inc postcode) _____
	Tel No:- _____

5 QTS checks to be carried out on the following people:-

APPLICANT 1	Surname: _____
	Forename(s): _____
	Date Of Birth _____
	TRN Number _____
	TRN stands for Teacher Reference Number and should be 7 digits in length

APPLICANT 2	Surname: _____
	Forename(s): _____
	Date Of Birth _____
	TRN Number _____
	TRN stands for Teacher Reference Number and should be 7 digits in length

APPLICANT 3	Surname: _____
	Forename(s): _____
	Date Of Birth _____
	TRN Number _____
	TRN stands for Teacher Reference Number and should be 7 digits in length

APPLICANT 4	Surname: _____
	Forename(s): _____
	Date Of Birth _____
	TRN Number _____
	TRN stands for Teacher Reference Number and should be 7 digits in length

Once completed, please send to FAX:- 0845 6431146