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| The supplier account will take 5-7 working days for set up. Please complete and return on your **letter headed paper**.  If you have any queries, please contact: [ddicb.financialservices@nhs.net](mailto:ddicb.financialservices@nhs.net) | |
| **Supplier Name (as displayed on Companies House and your Invoice):** |  |
| **Address:**  Address line 1: |  |
| Address Line 2: |  |
| Address Line 3: |  |
| Town/City: |  |
| Postcode: |  |
| Country: |  |
| Company Registration Number: |  |
| **Please add a contact name and telephone number of the appropriate person who will be able to verify the details supplied on this form.  NHS Shared Business Services (SBS) work on behalf of NHS Derby and Derbyshire ICB to verify these details and then set up the supplier account.  Without this security verification call, your supplier details will not be set up and your invoice will not be paid**. | |
| **Contact Name:** |  |
| **Telephone Number:** |  |
| **Email Address (for remittance advice):** |  |
| **Bank Account Details:**  **Name of Bank** |  |
| Sort Code: |  |
| Account Number: |  |
| Account Name: |  |
| **Name of Contact at ICB** |  |
| Electronic Invoicing?  Yes  or  No | Please consider applying for a Trade Shift connection which will support a more efficient payment process after the supplier account has been set-up. Our support will be offered by contacting the above email address. Thank you |
|  |  |