

Golder Associates (UK) Limited

Attenborough House
 Browns Lane Business Park
 Stanton on the Wolds
 Nottinghamshire NG12 5BL
 England

Tel: [44] (0)115 9371111
 Fax: [44] (0)115 9371100
 E-mail: gassim@golder.com
 http://www.golder.com

**GASSIM 2.5 SOFTWARE AND TRAINING ORDER FORM**

Company
Address Line 1
Address Line 2
Address Line 3
Address Line 4
Town/City
County/State
Post/ZIP Code
Country

Authorised Purchaser Name
Purchase Order Number (please attach)
Phone
Email

GasSim 2.5 is sold on the basis of a single user licence for installation on one PC or laptop only. Each copy of GasSim 2.5 sold requires a registered user name and email address.

Registered User Name
Registered User Email
Registered User Name
Registered User Email

Additional Registered Users should also be listed if more than two copies are being purchased. Registered User names and email addresses are required for the purposes of software licensing, helpdesk, and distribution of upgrades.

Sales	Price (£)	Quantity	Total (£)
GasSim 2.5 New Purchase	£1000		
GasSim 2.5 New Purchase (second and subsequent copies)	£750		
Training	Preferred dates (see 2013 flyer)		
GasSim 2.5 Two Day Training Course	£695		
Concessions (not for profit users)			
Regulator Copy of GasSim 2.5	£450		
Academic User (no helpdesk facility)	£250		
Academic User (second and subsequent sales)	£25		
GasSim 2.5 User Manual			
GasSim 2.5 User Manual. Bound High Quality Colour Copy	£100		
<i>If you are unsure how to determine what discounts apply, please contact Golder Associates before sending your remittance. Golder Associates cannot be responsible for delays in receipt of software due to underpayment.</i>	Subtotal		
	VAT at 20%		
	TOTAL		

****Please note we do not release software licence codes (to fully activate GasSim) until full payment has been received****

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GasSim 2.5 Payment Details

Payment for GasSim 2.5 can now be made by the three following methods:

1. Via cheque made payable to “Golder Associates (UK) Ltd”;
2. Via the BACs Electronic Transfer System; or
3. Via Credit Card. Please complete the details below

Credit Card							
VISA	<input type="checkbox"/>	Mastercard	<input type="checkbox"/>	Amex	<input type="checkbox"/>		
Card Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Start Date	<input type="text"/>	/	<input type="text"/>	End Date	<input type="text"/>	/	<input type="text"/>
Security Number	<input type="text"/>	The three digit number on back of card or for Amex the four digit number on the front.					
Name on Card	<input type="text"/>						
Signature	<input type="text"/>	Date	<input type="text"/>				
Address ¹	<input type="text"/>						
	<input type="text"/>						
	<input type="text"/>						

¹Address to which the Credit Card is registered.

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Please complete the full order form and return to Golder Associates at the above address.