

UK AUCTION REGISTRATION FORM

**Clarke Fussells
Auctioneers**

Please complete this form to receive your Buyer Number. Signing this form deems full acceptance of our Terms and Conditions of Sale as per our auction catalogue and as noted below. In particular that all lots are sold without warranty whatsoever expressed, or implied.

PADDLE NO.

- (1) I fully understand and agree to the terms and conditions as displayed and/or printed in this catalogue and/or as announced by the Auctioneers.
- (2) Section 6 Health and Safety at Work etc, Act 1974 (as amended).
I confirm that the vendor has drawn my attention to the above legislation and I hereby agree to take steps to ensure that, so far as is reasonably practicable, the articles purchased are designed and constructed to be safe and without risks to health at all times when being set, used, cleaned or maintained by persons at work. I will carry out all relevant and necessary testing and examination to meet this duty. I agree to relieve the Vendors/Agents/Auctioneers of their duties under the above legislation and to indemnify the Vendors/Agents/Auctioneers against any cost, damage, legal or other expenses in respect of any claim arising out of such legislation. If the Vendors consider it appropriate I agree to sign a similar undertaking to this one but with reference to specific lots.
- (3) Purchasers must ensure that all vehicles comply with all statutory and legal requirements prior to using such vehicles on the Public Highway and Roads. Such vehicles must be insured and all statutory documentation and certification must be in place. I will arrange for all relevant and necessary testing and examination and certification to meet this duty.
- (4) I agree and ensure that all portable appliances are checked for safety and that a valid/current P.A.T. will be carried out prior to use.

Contact Name:

Company Name:

Street:

District:

Town:

County:

Postcode:

Telephone:

Fax:

Mobile:

E-mail address:

If you do not wish to receive auction notifications in the future please tick this box.

Authorised Signature: Print Name:

Date:

EXPORT CUSTOMERS SHOULD COMPLETE A SEPARATE REGISTRATION FORM

ID VERIFICATION: TYPE OF ID CHECKED BY: