



## STANDARD FORM MANDATE

CONTRACTOR  
CONNECTION

### Payment Mandate

TO: 0	FROM: Mr. Jeremy Hartnell Basement Flat, 42 Malden Road London  NW5 3HG
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**Contractor Connection** means Crawford & Company Adjusters (UK) Limited, a company incorporated in England and Wales under company number 2908444 whose registered office is at Trinity Court, 42 Trinity Square, London EC3N 4TH, trading for the purposes of this agreement as 'Contractor Connection'.

**Standard Terms** means the standard terms applicable to all building works carried out via the Contractor Connection Network. A copy of these should have been presented with this Mandate. If not, please request a copy from Contractor Connection.

**Contractor Connection Reference:** BP-12751

**Insurance claim?** Yes / No

**Insurer Claim Reference:** \*\*ENTER INSURANCE REFERENCE\*\*

**Building Contractor:** Garrard Building & Construction Limited, whose registered office is at 22 Boulton Road, Stevenage, Hertfordshire SG1 4QX

**Schedule of Works:** the description of the Works to be carried under this Mandate, as provided at or about the same time as this Mandate.

I / ~~we~~\* understand and agree to the above named Building Contractor carrying out building works to my / ~~our~~\* property subject to the Contractor Connection Network Standard Terms and Schedule of Works which are hereby incorporated into this mandate.

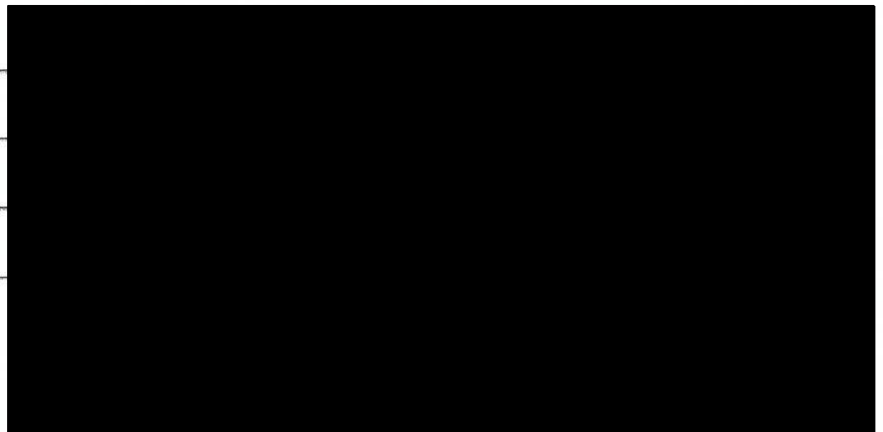
I / ~~we~~\* understand and agree that by signing this mandate I / ~~we~~\* will create a binding legal contract with the Building Contractor. I / ~~we~~\* further understand and agree that Contractor Connection is acting as a mere agent in this arrangement, and that neither Contractor Connection, nor any Insurer (if one is involved), will be party to the contract I / ~~we~~\* enter into.

Where the building works are carried out in the context of an insurance claim, I / ~~we~~\* further confirm that Insurers may issue payment to the Building Contractor under direction of Contractor Connection via the 'Contractor Connection Contractors Account'. I / ~~we~~\* will remain responsible for payment of the policy excess / VAT (if applicable) direct to the Building Contractor.

Where the building works are carried out other than in the context of an insurance claim then I / ~~we~~\* agree to make payment to Contractor Connection (as the Building Contractor's agent for payment collection purposes) for all building works.

\*Please delete where applicable

Name (In Block Capitals):
Signed:
Date:





Garrard Building & Construction Limited  
22 Boulton Road, Stevenage, Hertfordshire SG1 4QX

<b>Policyholder:</b>	Mr. Jeremy Hartnell
<b>Property Address:</b>	Basement Flat, 42 Malden Road, London
<b>Client Project Ref:</b>	BP-12751
<b>Garrards Project Ref:</b>	F18177

As homeowner / occupier I do / do not (circle/delete as applicable) give my permission for the staff of Garrard Building and Construction Limited and their subcontractors to use the facilities indicated below (delete if not applicable):

Sanitary conveniences	✓
Washing facilities	N/A
Drinking water	✓
Rest Facilities	N/A

Name

Signature

Date:

The signature below indicates that the "Responsible Person" identified accepts for Garrard Building and Construction Limited that should any person under the control of Garrard Building and Construction Limited or their sub-contractor's misuse any of the facilities provided that person will be dismissed from site and any costs incurred may be charged to the company and that permission to use the facilities may be withdrawn.

Name of Responsible  
Person for Garrards  
(Works Manager):

Signature:

Date: