

EUROPEAN TOLL ROAD SERVICES



**HARBOUR
SHIPPING**

Motorway tolls are in operation throughout Europe and are an unavoidable part of daily business for the transport sector

Harbour Shipping Ltd can help you by offering various toll services, that save you time and money

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www.harbourshipping.co.uk

French/Spanish Motorway Toll Tags & Liber-T Badges



Our Motorway TAG's covering vehicles over 3.50 Tonnes, work in France & Spain.

The Liber-T badges are for vehicles up to 3.50 Tonnes and operate in France only.

- ✔ Improves your cash flow reducing the necessity for running money.
- ✔ Saves time and money by using the Automatic Barrier system avoiding long queues at the peage booths.
- ✔ Improves security as the TAG's are linked to the vehicles registration number.



We supply Liber-T Badges for vehicles up to 3.50 Tonnes with a maximum height of 3.00 Metres. This now enables the small van operators to utilise the entire French Motorway System on credit.

Liber-t

Frejus & Mont Blanc Alpine Tunnel Cards



Our Alpine tunnel cards allow you to utilise either tunnel, paying only half the round trip price. This gives you a considerable saving on the single crossing rate.

- ✓ Allowing you the freedom to pick the route most suited to you.
- ✓ Saving you time and money.



We have the Eurovignette terminals for Benelux located in all three of our offices allowing you the opportunity to purchase the tolls without the necessity to search for an available terminal before reaching the Belgium border.

Italian Motorway System



We offer both the **VIA Card** & **Telepass** for the Italian Motorway system.

Like the TAG, this also allows you to save time and money, improves your cash flow and offers the same level of security, as both the card and Telepass are linked to the vehicle registration.



Other Services



- ✓ 24 Hour European Ferry Booking Services on all of the major routes
- ✓ 24 Hour Customs Clearance at our port of Dover and Stop 24 (Junction 11 on the M20) offices
- ✓ 24 Hour Bureau de Change located at our Dover Western docks and Stop 24 offices
- ✓ 24 Hour Eurovignettes at all 3 Harbour Shipping Offices





Application Form for Monthly Credit Account

Company trading Title _____

Address _____ Tel _____ Fax _____

Email _____

Company Registered No. _____

Date of incorporation _____

Postcode _____ Date commenced trading _____

Directors _____

Anticipated amount of Credit outstanding at any one time £: _____

(For Non Ltd/Plc Companies a full set of up-to-date accounts is required to obtain a credit facility)

Name and address of Bankers _____ Account No. _____

Sort Code _____

We understand that, if this application is accepted, a Credit Account will be opened in our name for the payment of freight and ancillary services on our behalf. We accept the terms of credit of Harbour Shipping Limited, under which payment of accounts must be made no later than the end of the month following the month of issue, except for Customs Duty, VAT, Tunnel and Motorway Toll accounts, paid on our behalf which are due immediately an invoice is rendered. We understand that Harbour Shipping Limited reserve the right to withdraw credit facilities at any time, and in the event failure to pay accounts within the terms mentioned earlier in this paragraph shall render ALL unpaid accounts immediately payable and due.

We authorise our bankers to provide references on us to Harbour Shipping Limited. A copy of the consent form, signed in accordance with the mandate is attached. We understand that you will forward this to our bankers when requesting references.

We acknowledge we have received a copy of the Harbour Shipping Limited terms of trading and we agree that all business is contracted in accordance with these terms

Yours Faithfully

Authorised signatory-status

Name in BLOCK CAPITALS _____

Status _____

Date _____

This document is sent to your bank giving authority to ask for a reference. We meet all costs.

To _____ Bank Bank address _____

Our reference _____

AUTHORITY TO REQUEST A BANK REFERENCE

I / We _____ Consent Account number: _____

To _____ Bank Plc Sort code: _____

providing reference on me / us to Harbour Shipping Ltd. until further notice.

For and on behalf of: _____

X Signature(s): _____

Date: _____ | _____ | _____

Company stamp

(Blanket authorities should be signed in accordance with the Mandate)

DIRECT DEBIT INSTRUCTION



Please complete parts 1 to 4 to instruct your Bank/Building Society to make payments directly from your account. Then return the whole form to: Harbour Shipping Ltd, East Camber Office Building, Eastern Docks, Dover, Kent, CT16 1JA

To the Manager

1 Please write the full postal address of your Bank/Building Society in the box above

2 Name(s) of account holder

3 Account Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Banks/Building Societies may refuse to accept instructions to pay direct debits from some type of account

PLEASE DO NOT WRITE BELOW THIS LINE

Account Number



After completion the Bank/Building Society Branch should detach the lower part of the form and return it to Harbour Shipping Ltd

Harbour Shipping Ltd
East Camber Office Building
Eastern Docks
Dover
Kent
CT16 1JA

Originator's ID number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Originator's ID number (office use only)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Instruction to your bank:

Please pay Harbour Shipping Ltd direct debits from the account detailed on this instruction, subject to the safeguards assured by The Direct Debit Guarantee. I understand that this instruction may remain with Harbour Shipping Ltd, and if so, details will be passed electronically to my bank.

The Direct Debit Guarantee

This guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits. If there are any changes to the amount, date or frequency of your Direct Debit Harbour Shipping Ltd will notify you 14 working days in advance of your account being debited or as otherwise agreed. If you request Harbour Shipping Ltd to collect a payment, confirmation of the amount and date will be given to you at the time of the request. If an error is made in the payment of your Direct Debit by Harbour Shipping Ltd or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society. If you receive a refund you are not entitled to, you must pay it back when Harbour Shipping Ltd asks you to. You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

X Signature(s)

Date

FOR BANK/BUILDING SOCIETY USE

Branch title _____

Sort code:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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A/c no:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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A/c name:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Direct debits in respect of our customers Instruction under the reference number quoted should be made out as above

For _____

Manager _____

Date _____