## AGENCY AGREEMENT



The Agent will undertake to obtain supplies of Part IX Drug Tariff Appliances from the Contractor under the terms laid out below: -

- 1) Goods are ordered in the normal way either by phone or fax. The Agent will make clear that goods ordered are 'agency' and the Agent will provide the following information for each prescription:
  - a) Full product description
  - b) Patient's name initials and address
  - c) Prescription serial number
- 2) Goods will be despatched by the Contractor in the normal way for next working day delivery. The Contractor will provide a separate delivery note for agency goods quoting the following information:
  - a) Full product description
  - b) Patient name and initials
  - c) Prescription serial number

All goods ordered as agency will be supplied to the Agent at nil value by the Contractor.

3) The Agent will inform the patient and undertake to return all prescriptions relating to the agency delivery to the Contractor by return:

NB. Please ensure that all prescriptions are not stamped and contain only Drug Tariff Appliances. Please mark the return envelope with Agents account number.

- 4) Dispensing Fees.
  - a) Part IX products
  - b) Additional Dispensing Appliances
  - c) ISC Catheters
  - d) Ostomed Extra Fee

£0.90 per item £3.40 per qualifying item £9.30 per qualifying item **£2.00 per item** 

Please note that VAT returns are the responsibility of the Agent.

5) In the event that the Agent fails to return the prescription to the Contractor within 3 days, all goods supplied against non-returned prescriptions will be charged at **Drug Tariff prices**.

The Contractor will observe absolute confidentiality in relation to all patient and prescription information provided by the Agent in the course of any transaction.

I agree to the above conditions:



Please return this completed form by fax on 01253 881298

Signed
Print name:
Position:
Pharmacy:
VAT No:
Date:
Account Number: