



Diva Care Limited  
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London Street,  
Fairford  
Glos, GL7 4AH  
Tel 01285 712 326  
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Email : [crb.office@btconnect.com](mailto:crb.office@btconnect.com)  
Web : [www.Divacare.co.uk](http://www.Divacare.co.uk)

**Debit Card transaction permission slip.**

Client Company Name.....

Client Name.....

Card Type..... Issuing Bank.....

Address as it appears on card statement.....

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Long Card Number.....

Start Date (if Applicable)..... End Date.....

Issue Number (If Applicable).....

Security Code (Last 3 Numbers in Signature Strip) .....

**I hereby give permission for Diva Care Ltd to debit my card accordingly for each submitted CRB form. The price will be as per website.**

**Name..... Date.....**

(Block Capitals)

Signature.....