

NOVATION REQUEST FORM (UNREGULATED AGREEMENTS ONLY)

DETAILS OF CURRENT HIRER

Current Hirer Name (Company/Large Partnership)

Company Registration
Number

Company Status (Please tick)

- Active
- Administration
- Liquidation

Registered Office Address

Main Contact Details

Name:

Telephone Number:

Email Address:

Finance Contact Details

Name:

Telephone Number:

Email Address:

Alphabet Account Code(s)

DETAILS OF NEW HIRER

New Hirer Name (Company/Large Partnership)

Company Registration Number

Registered Office Address

Main Contact Details

Name:

Telephone Number:

Email Address:

Finance Contact Details

Name:

Telephone Number:

Email Address:

Alphabet Account Code(s)

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Reason For Novation (Please tick)

- Business merger, acquisition, or reorganisation
- Entering, or already in insolvency process

<input type="checkbox"/>
<input type="checkbox"/>

Vehicle(s) To Be Novated (Registrations)

Reason For Novation - Please provide all details below

Novation Charges (Excluding VAT)

No. of vehicles:
1 = £250
2 + = £25 per additional vehicle

New Hirer Acknowledgement
(Please be aware that a novation will not be considered without the below being completed)

Statutory Director's Printed Name:

Statutory Director's Signature:

Date Completed:

* Please email the completed form to novations@alphabet.co.uk for processing *