## PARTNER AUTHORITY SCHEME REGISTRATION FORM



66 South Lambeth Road London SW8 1RL

Tel: 0844 561 6136

Web: www.labc.uk.com/pas

This information will enable LABC to match you with a local authority based on your needs. Return the completed form via email to <a href="mailto:pas@labc.uk.com">pas@labc.uk.com</a> or go to the above webpage and complete the form electronically.

Company Name:		
Address:		
		Post Code:
Main Contact (Mr/Miss/Mrs/Ms/Other):	First name:	Last name:
Job Title:		
Tel:	Fax:	Email:
Secondary Contact (Mr/Miss/Mrs/Ms/Other):	First name:	Last name:
L.I. Tal.		
Job Title:		
Tel:	Fax:	Email:
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Tel:  Nature of project(s), potential project (s) and the second project (s	ential value, geographic	al location(s), etc.
Tel:  Nature of project(s), pote  Preferred Partner Authority Name: Barnsley	ential value, geographic	al location(s), etc.
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Tel:  Nature of project(s), pote  Preferred Partner Author  Authority Name: Barnsley  Main Contact	ential value, geographic	al location(s), etc.
Tel:  Nature of project(s), potential project (s), potential project	ential value, geographic	al location(s), etc.
Tel: Nature of project(s), potential Preferred Partner Author Authority Name: Barnsley Main Contact Name: Andrew Bullen Tel: (01226) 772675	ential value, geographic	al location(s), etc.