



Unit 11, Bristol Way Slough Berkshire SL1 3TD  
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VAT Reg. No. 480 0958 39

INVOICE Page 1

GallifordTry Southern Water WTW  
Appledram Lane  
Chichester  
PO20 7PE

Invoice No	49143
Invoice Date	31/05/2026
Order No	9200145061P
Account Ref	GTBV

\* Indicates REVERSE CHARGE SUPPLY - Customer to pay VAT to HMRC

Description	Net Amt	VAT %	VAT
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\*  
Supply Operator only  
WE : 31/05/26  
Timesheet nos : 51494  
Operator working time

40 hrs @ £25 per hour 1,000.00 0.00 0.00  
Customer to pay output tax of £200.00 to HMRC

Site Address  
Budds Farm

Total Net Amount	£	1,000.00
Total Tax Amount	£	0.00
Invoice Total	£	1,000.00

Please note our new bank details for all payments  
Sort code: 536158 Account number: 71650776



Time Sheet

No: 51494

Please submit weekly via post or timesheets@hickeyplanthire.co.uk

On hire to: GT  
Site Address: BURDS FARM

Driver: Jarig Degruchy  
Week Ending: 31/5/26  
Machine:

Day	Date	Hours Worked	Remarks	Equipment
Monday	—	—	BH	300mm <input type="checkbox"/>
Tuesday	24/5/26	10		450mm <input type="checkbox"/>
Wednesday	25/5/26	10		600mm <input type="checkbox"/>
Thursday	26/5/26	10		750mm <input type="checkbox"/>
Friday	27/5/26	10		900mm <input type="checkbox"/>
Saturday	—			1050mm <input type="checkbox"/>
Sunday	—			Dig Bkt <input type="checkbox"/>
Total		40		Ditch <input type="checkbox"/>

Drivers Bonus - £

Breaker   
Forks

Other: \_\_\_\_\_

No allowances can be made for bad weather conditions. All hires are subject to standard C.P.A conditions. On rubber tyred plant - punctures are the hirer's responsibility. All glass breakages are chargeable. Minimum period of hire is nine hours per day.

The time and hours shown hereon are correct and charges invoiced on that basis will be accepted by the hirer. For and on behalf of CONTRACTOR (Hirer):

SIGNATURE: JD

DATE: 27/5/26

OPERATORS SIGNATURE: JD

Package

Record Of Weekly Inspection

	Serviceable	Unserviceable		Serviceable	Unserviceable
Tyres/Tracks			Lights		
Oil levels			Attachments		
Quick hitch			Hydraulic rams		
Mirrors			Windows		
Pins			Greasing		

Notice to Operator: This section must be completed on Friday each week. Any defect that affects safety should be reported to the office immediately.

I confirm that I have completed a weekly inspection of the items listed above and noted any defects:

OPERATORS SIGNATURE: JD