PP use only	

PayPartners

Payroll Service Application

				✓ Tick to inc	dicate	
	Sta	ndard Direc	t Paymer	nt		
		f Directed Su sonal Budge r	• •			
	Maı	naged Accou	ınt			
Service Nan			Enter full name	e of proposed serv	vice user	
Circle to indicat	e					
Blackpool	Bury	Nottingham	Oldham	Tameside	Trafford	NHS

Fill out all the information required

Do not detach any of the pages

Return the whole booklet to PayPartners

with your I.D.

www.pay-partners.co.uk

<u>Payroll Service APPLICATION</u> – To be completed in ALL cases

Service Comm	nencement Date	9	/_	/					
Support Hours	s per Week								
THE SERVICE	USER - Must be	completed in	ALL cases						
Surname					Title	Mr/Mrs/Ms/Miss			
Forename(s)									
Address:									
Post Code			Tel No						
Date of Birth	//	, 	Gender	N	/lale / Female				
Child/Adult			NI number						
			ONLY if the Servi	ce User a	bove is a	a child or an			
Surname					Title	Mr/Mrs/Ms/Miss			
Forename(s)									
Address:									
Forename(s) Address: Post Code Date of Birth / Gender NI number NOMINATED CONTACT - To be completed ONLY if the Service User above is a child or an adult unable to administer their affairs Surname Forename(s)									
Post Code			Tel No						
Date of Birth	//	, 	NI number						
to the Service						Other			

PAYROLL SERVICE AGREEMENT BETWEEN - Must be signed in ALL cases

- (1) **PayPartners Ltd,** Lancastrian Office Centre, Talbot Road, Stretford, Manchester M32 OFP ("PayPartners Ltd") and
- (2) The Service User (named on page 1) of the Direct Payment Payroll Service ("the Service User")

IN WITNESS whereof the duly authorised representatives of PayPartners Ltd and the Service User have hereunto set their hands the day and year first before written

Signed by for and on behalf of PayPartners Ltd

Signature	sevent
Printed Name	Stephen R Moreton
Date	DD/MM/YYYY

Signed by for and on behalf of the Service User or Nominated Contact

Signature	
Printed Name	
Date	

WE NEED SOME IDENTIFICATION!

In common with all accountancy and legal practices, PayPartners is required by the Proceeds of Crime Act 2002 and the Money Laundering Regulations 2007 to:

- Maintain identification procedures for clients and beneficial owners of clients
- Maintain records of identification evidence and the work undertaken for the client, and
- Report, in accordance with the relevant legislation and regulations

PayPartners is required to verify ALL our Clients and the Service Users we work with. We do this by checking acceptable I.D. You need to supply either one document from section A or alternatively one document from section B plus one document from section C.

Acceptable ID is an "in date" Government issued document with a photograph such as a passport or a driving licence. Where this is not available then we require an "in date" Government issued document with no photograph accompanied by one utility bill.

Supply ONE of the documents listed in Section A

SECTION A										
A Government issued document which	Valid Passport; Valid photo-card driving licence									
incorporates your full name and photograph and	National Identity card (non UK Nationals)									
either residential address or date of birth	Firearms certificate or shotgun licence									
	Identity card issued by the Electoral Office for									
	Northern Ireland									

WE NEED SOME IDENTIFICATION! (continued)

Alternatively, supply ONE of the documents listed in Section B plus ONE from Section C

SECT	TION B
A Government issued document (without a	Valid (old Style) full UK driving licence
photograph) incorporating your full name	Recent evidence of entitlement to a state of local authority funded benefit (including housing and council tax benefit), tax credit, pension, educational or other grant
SEC1	TION C
A second document which should be either Government issued, or issued by a judicial authority, a public sector body or authority, or	Instrument of a court appointment (such as liquidator or grant probate)
issued by another FSA regulated firm in the UK financial services sector or in a compatible	Current Council Tax demand letter or statement.
Jurisdiction. This document MUST SHOW your full name and either residential address or date of birth	 Current bank statement, or credit/debit card statement issued by a regulated financial sector firm in the UK, EU or comparable jurisdiction (but NOT printed off the internet) Utility bill (but NOT printed off the internet)

How to present your documents:

- Posting the original(s) with this application (recorded post recommended especially for Passports which we will copy & return to you by recorded post).
- Posting a verified copy of the original(s) a verified copy is one that shows an original signature of a Solicitor or Accountant for example but NOT a family member.
- By personal representation at our offices: Third Floor, Lancastrian Office Centre, Talbot Road, Stretford, Manchester M32 0FP, between 8.30 a.m. and 5.00 p.m.



PayPartners offers you an easy way to pay for our service. Where you are responsible for payment because the money to do this is included in your personal budget then we will collect this from you by Direct Debit. You will be issued with an invoice each time we process a payroll and this will tell you when we will collect our fee.

If you are coming to PayPartners on our Managed Account service and you are required to make a contribution to your budget then we will collect this from you using Direct Debit.

Direct Debit is a quick an easy way to make payments to PayPartners. Any payments made to us using this method are covered by the Direct Debit Guarantee. There is an Direct Debit mandate form on page 15 of this application.

<u>Proceeds of Crime Act 2002 and the Money Laundering Regulations 2007 – Client Questionnaire (Individual)</u> – 'The Service User' must be completed in ALL cases

	The Service User	Your Partner (if applic.)
Full Name		
Date of Birth		
Nationality		
Gender	Male / Female	Male / Female
National Insurance Number		
Address 1		
Address 2		
Town		
Post Code		
Sources of Capital e.g. investments, savings Sources of Income e.g. wages from working, a pension scheme, investments, Local Authority (Direct Payments) Are you or have you been subject to Bankruptcy proceedings? Are you or have you been a disqualified Company Director? Any other business	YES / NO YES / NO	YES / NO YES / NO
interests/connected businesses/sources of income?	YES / NO	YES / NO
If you (or you part	ner) are employed please comple	ete the details below
Employers Name		
Nature of Business		
PAYE ref number		

PP Use		

PA Number 1 - Starter Form

				<u>PA</u>	<u> Nu</u>	mber	1 - 3	lai	ter r	<u>'OI</u>	<u> </u>						
Service l	User na	me															
Service	User Te	l nu	mber			La	Landline					Mobile					
PA Start	Date																
1. New P	A Detail	s															
Surname											Title) N	lr/I	Mrs/	/Mis	ss/l	VIs
Forenam	e(s)			Fi	rst Fore	ename					Se	econd F	oren	ame			
Address '	1																
Address 2	2																
City									Post	t Co	ode						
Date of B	Birth								Ge	nde	er	IV	IAL	E /	FEN	IAL	E
Tel Numb	per				Landline					Mobi			Nobile				
National Number	Insuran	ice	e.g. A		В	1	2		3		4	5	5 6)		С
Passport	Numbe	r					Nationality										
Bank Nar	ne						Bank Branch										
Sort Code	Э						Accou	ınt I	Numb	er							
Account	Name		1	1	•	1	1					•	'	•			•
2. Hours	to be w	orke	ed														
Day	Mon		Tue		Wed	· k	Thu		Fri		Sat		Sı	un		We Tot	
Hours																	
3. Payme	nt Rate		S	tand	lard I	Rate		C	Other	1				Oth	er 2	2	
Pay Rate	per Hou	ır	£				£					£					
Pay Frequ	uency		As	s/Wh	nen	✓	4	-We	ekly		✓		Monthly 🗸				✓
The S	Service U	ser a					to add t								l an	d m	ake
Signed (I	New PA)																
Today's c	late																

PA Number 1 - Tax Statement concerning This Employment

TICK ONE that applies to you and follow the instruction given in the response. This will help us to tax you correctly. I have a P45 from a previous employer and have enclosed it with this form Response - we will apply the code on your P45 to your record I will have a P45 from a previous employer and will send it on when I receive it Response - complete the starter statement below. Send the P45 to us when you receive it I do not have a P45 Response - complete the starter statement below I am a student working ONLY in the holidays (Summer, Xmas, Easter) Response - complete the starter statement below I am a student working during term time and holidays Response - complete the starter statement below **Starter Statement** (substitute P46/P45) Your present circumstances. Please read all the following statements (A, B and C) and enter 'X' in the **ONE** box that applies to you. A - This is my first job since 6th April last and I HAVE NOT been receiving taxable Jobseekers Allowance, Employment and Support Allowance or taxable Incapacity Benefit or a state or occupational pension. **B** - This is now my only job, but since 6th April last I HAVE had another job, or have received taxable Jobseekers Allowance, Employment and Support Allowance or taxable Incapacity Benefit. I do not receive a state or occupational pension. **C** - I have another job or receive a state or occupational pension. Please also consider the following statement If this applies to you then enter 'X' in the box **D** - Student Loans (advanced in the UK). If you left a course of UK Higher Education before last 6th April and received your first UK Student Loan instalment on or after 1st September 1998 and you have not fully repaid your Student Loan enter 'X' in the box. Do not enter 'X' if you are repaying your UK Student Loan by agreement with the UK Student Loans Company to make monthly payments through your bank or building society account. I confirm the information I have placed an 'X' against above is correct. Name (Printed) Signed Date

PP Use		

PA Number 2 - Starter Form

					AIN	<u>iuiii</u>	DCI	<u>z - 3</u>	ıtaı	(CI F	<u>UI</u>								
Service	User na	me																	
Service	User Te	l nu	ımbe	r			Landline						Mobile						
PA Start	Date									L									
1. New P	A Details	s																	
Surname												Title	Э	Mr/	'M	rs/N	/liss	s/IV	ls
Forenam	e(s)				First F	orenan	ne					S	econ	d Fore	nan	ne			
Address	1																		
Address 2	2																		
City										Post	Co	ode							
Date of B	Birth									Gei	nde	er		MA	LE	/ FE	EM/	ALE	
Tel Numb	per	Land												Mobile					
National Number	Insuran	се	e.g. <i>F</i>	A	В		1	2		3		4		5		6		C	;
Passport	Number	-								Nation	nali	ity							
Bank Nar	ne						Bank Branch												
Sort Code	9							Accou	unt	Numbe	er								
Account	Name		1		I											1 1			<u>. I </u>
2. Hours	to be wo	orke	ed																
Day	Mon		Tue		W	ed	1	Γhu		Fri		Sat		S	ur	1		Vee Fot a	
Hours																			
3. Payme	ent Rate			Stai	ndar	d Ra	te		(Other 1	l			Other 2					
Pay Rate	per Hou	ır	£					£					£	<u>:</u>					
Pay Freq	uency		А	s/V	Vher	1	✓	4	-We	ekly		✓	Monthly				√		
The S	Service Us	ser a								above p with ho							and	l ma	ıke
Signed (I	New PA)																		
Today's c	late																		

PA Number 2 - Tax Statement concerning This Employment

TICK ONE that applies to you and follow the instruction given in the response. This will help us to tax you correctly. I have a P45 from a previous employer and have enclosed it with this form Response - we will apply the code on your P45 to your record I will have a P45 from a previous employer and will send it on when I receive it Response - complete the starter statement below. Send the P45 to us when you receive it I do not have a P45 Response - complete the starter statement below I am a student working ONLY in the holidays (Summer, Xmas, Easter) Response - complete the starter statement below I am a student working during term time and holidays Response - complete the starter statement below **Starter Statement** (substitute P46/P45) Your present circumstances. Please read all the following statements (A, B and C) and enter 'X' in the **ONE** box that applies to you. A - This is my first job since 6th April last and I HAVE NOT been receiving taxable Jobseekers Allowance, Employment and Support Allowance or taxable Incapacity Benefit or a state or occupational pension. **B** - This is now my only job, but since 6th April last I HAVE had another job, or have received taxable Jobseekers Allowance, Employment and Support Allowance or taxable Incapacity Benefit. I do not receive a state or occupational pension. **C** - I have another job or receive a state or occupational pension. Please also consider the following statement If this applies to you then enter 'X' in the box **D** - Student Loans (advanced in the UK). If you left a course of UK Higher Education before last 6th April and received your first UK Student Loan instalment on or after 1st September 1998 and you have not fully repaid your Student Loan enter 'X' in the box. Do not enter 'X' if you are repaying your UK Student Loan by agreement with the UK Student Loans Company to make monthly payments through your bank or building society account. I confirm the information I have placed an 'X' against above is correct. Name (Printed) Signed Date

Money Laundering Regulations and Identification Procedure

Social Worker/Direct Payment Support Worker Form

To PayPartners Ltd

1, .		employed by	council as
a <u>.</u>		, can verify and confirm for the serv	vice user named
be	low (tick each sta	tement):	
1	I have met the pro	√	
2	The proposed serwill be registered)	vice user lives at the address below (where the payroll account	√
3		vice user is/will be entitled to a direct payment/ILF payment to	√
4	I have enclosed a	utility bill confirming 2 & 3 above	√
Na Us	me of Service er		
Sei	rvice User		
ade	dress		
Pos	st Code		
Sig	ned		
Pri	nt Name		
Da	te		



Employer's PAYE reference (see Notes on page 2)

Authorising your agent to use PAYE/CIS online services (Internet)

Accounts Office reference (see Notes on page 2)

lease read the notes on page 2 before	completing this authority
Enter your name - use capital letters	Agent's details
I, the above, authorise my agent to use PAYE online and/or CIS online services to receive information over the Internet from HM Revenue & Customs (HMRC) on my behalf. Name of agent PayPartners Ltd	Address PayPartners Ltd Lancastrian Office Centre Talbot Road, Stretford Manchester Postcode
Tick one or both of the following I authorise the agent named above to use PAYE online services to receive information over the Internet X from HMRC on my behalf	M32 0FP Contact name Direct Payments Payroll Manager Phone number
I am a contractor in the Construction Industry Scheme and wish to authorise the agent named above to use the CIS online services to receive information over the Internet from HMRC on my behalf	Fax number
Employer/contractor details	Email address
Name	PAYE Agent ID Code
Address	Agent's Government Gateway Identifier You need to get this from your agent
	Signature
Postcode Are you registered as an organisation on the Government Gateway? No Yes If you are registered, you can complete your agent authorisation at the Government Gateway instead of using this paper form. We can update your records quicker if you	Date DD MM YYYY

FBI2 Page 1 HMRC 10/12

Notes

This form FBI2 can only be used to authorise accepting information over the Internet.

Please send the completed form to:

HM Revenue & Customs Central Agent Authorisation Team Benton Park View Longbenton NEWCASTLE UPON TYNE NE98 1ZZ

If your agent is registered, they can use the **Online Agent Authorisation** service to complete this authorisation online. It can save time and reduce the chances of error.

Please use form 64-8 if you want to authorise an agent to act on your behalf generally, in connection with Self Assessment or other HMRC matters.

Go to www.hmrc.gov.uk/online for more information about our Online services.

Reference numbers

Employer PAYE reference - This can be found on correspondence you receive from your HMRC office, for example forms P6, P9, P35.

Accounts Office reference - This can be found on the yellow payslip booklet P30BC sent to you by your HMRC Accounts Office.

Who should sign the form

It depends what type of employer you are. See the guidance below.

Type of employer/contractor	Who signs the form
Individual	You
Companies	The secretary or any other responsible officer of the company
Partnerships	The partner responsible for the partnership's affairs
	It applies only to the partnership. Individual partners need to sign a separate authority for their own affairs
Trusts	One or more of the trustees

How we use your information

HM Revenue & Customs is a Data Controller under the Data Protection Act 1998. We hold information for the purposes specified in our notification to the Information Commissioner, including the assessment and collection of tax and duties, the payment of benefits and the prevention and detection of crime. We may use this information for any of them.

We may get information about you from others, or we may give information to them. If we do, it will only be as the law permits to:

- check the accuracy of information
- · prevent or detect crime
- · protect public funds.

We may check information we receive about you with what is already in our records. This can include information provided by you, as well as by others, such as other government departments or agencies and overseas tax and customs authorities. We will not give information to anyone outside HM Revenue & Customs unless the law permits us to do so. For more information go to www.hmrc.gov.uk and look for Data Protection Act within the Search facility.



Authorising your agent

Please tick the box(es) and provide the reference(s)

requested only for those matters for which you want

Please read the notes on the back before completing this authority. This authority allows us to exchange and disclose information about you with your agent and to deal with them on matters within the responsibility of HM Revenue & Customs (HMRC), as specified on this form. This overrides any earlier authority given to HMRC. We will hold this authority until you tell us that the details have changed.

of (name of your busin	ess, company or trust if applicable)
authorise HMRC to disc	close information to
PayPartners Ltd	
behalf, and the informa	ated agent has agreed to act on my/ou ation is correct and complete. nited to the matters shown on the form.
Signature see note 1 ove	rleaf before signing
Date	
Give your personal deta	ils or company registered office here
Address	
Postcode	
Postcode Phone number	
	s here
Phone number	0.0000000000000000000000000000000000000
Phone number Give your agent's detail:	s here Lancastrian Office Centre Talbot Road
Phone number Give your agent's detail:	Lancastrian Office Centre Talbot Road Stretford
Phone number Give your agent's detail:	Lancastrian Office Centre Talbot Road Stretford Manchester
Phone number Give your agent's detail:	Lancastrian Office Centre Talbot Road Stretford
Phone number Give your agent's detail: Address	Lancastrian Office Centre Talbot Road Stretford Manchester
Phone number Give your agent's details Address Postcode Phone number	Lancastrian Office Centre Talbot Road Stretford Manchester M32 0FP 0161 874 1625
Phone number Give your agent's detail: Address Postcode	Lancastrian Office Centre Talbot Road Stretford Manchester M32 0FP
Phone number Give your agent's detail: Address Postcode Phone number Agent codes (SA/CT/PAYE)	Lancastrian Office Centre Talbot Road Stretford Manchester M32 0FP 0161 874 1625 HI7417
Phone number Give your agent's details Address Postcode Phone number	Lancastrian Office Centre Talbot Road Stretford Manchester M32 0FP 0161 874 1625 HI7417 K18RHQ47345L
Phone number Give your agent's detail: Address Postcode Phone number Agent codes (SA/CT/PAYE)	Lancastrian Office Centre Talbot Road Stretford Manchester M32 0FP 0161 874 1625 HI7417 K18RHQ47345L
Phone number Give your agent's detail: Address Postcode Phone number Agent codes (SA/CT/PAYE)	Lancastrian Office Centre Talbot Road Stretford Manchester M32 0FP 0161 874 1625 HI7417 K18RHQ47345L
Phone number Give your agent's detail: Address Postcode Phone number Agent codes (SA/CT/PAYE) Client reference	Lancastrian Office Centre Talbot Road Stretford Manchester M32 0FP 0161 874 1625 HI7417 K18RHQ47345L
Phone number Give your agent's details Address Postcode Phone number Agent codes (SA/CT/PAYE) Client reference	Lancastrian Office Centre Talbot Road Stretford Manchester M32 0FP 0161 874 1625 HI7417 K18RHQ47345L Direct Payment Service User

HMRC to deal with your agent.
Individual*/Partnership*/Trust* Tax Affairs
*delete as appropriate (including National Insurance)
Your National Insurance number (individuals only) If you are
self employed tick here
Unique Taxpayer Reference (UTR) (if applicable)
If UTR not yet issued tick here
If you are a Self Assessment taxpayer, we will send your Statement of Account to you, but if you would like us to send it to your agent instead, please tick here
Tax credits
Your National Insurance number (only if not entered above)
W. L. J.
If you have a joint tax credit claim and the other claimant wants HMRC to deal with this agent, they should sign here
Name
Signature
Joint claimant's National Insurance number
Corporation Tax
Company Registration Number
Company's Unique Taxpayer Reference
NOTE: Do not complete this section if you are an
employee. Only tick the box if you are an employer
operating PAYE
Employer PAYE Scheme
Employer PAYE reference
VAT (see notes 2 and 5 overleaf)
VAT Registration Number
If not yet registered

tick here

HMRC 08/11

1 Who should sign the form

If the authority is fo	r
------------------------	---

If the authority is for	Who signs the form			
You, as an individual	You, for your personal tax affairs			
A Company	The secretary or other responsible officer of the company			
A Partnership	The partner responsible for the partnership's tax affairs. It applies only to the partnership. Individual partners need to sign a separate authority for their own tax affairs			
A trust	One or more of the trustees			

2 What this authority means

· For matters other than VAT or tax credits

We will start sending letters and forms to your agent and give them access to your account information online. Sometimes we need to correspond with you as well as, or instead of, your agent.

For example, the latest information on what Self Assessment (SA) forms we send automatically can be found on our website, go to

www.hmrc.gov.uk/sa/agentlist.htm

or phone the SA Helpdesk on 0845 9000 444. You will not receive your Self Assessment Statements of Account if you authorise your agent to receive them instead, but paying any amount due is your responsibility.

We do not send National Insurance statements and requests for payment to your agent unless you have asked us if you can defer payment.

Companies do not receive Statements of Account,

· For VAT and tax credits

We will continue to send correspondence to you rather than to your agent but we can deal with your agent in writing or by phone on specific matters. If your agent is able to submit VAT returns online on your behalf, you will need to authorise them to do so through our website. For joint tax credit claims, we need both claimants to sign this authority to enable HM Revenue & Customs to deal with your agent.

3 How we use your information

HM Revenue & Customs is a Data Controller under the Data Protection Act 1998. We hold information for the purposes specified in our notification to the Information Commissioner, including the assessment and collection of tax and duties, the payment of benefits and the prevention and detection of crime, and may use this information for any of them.

We may get information about you from others, or we may give information to them. If we do, it will only be as the law permits to:

· check the accuracy of information

- · prevent or detect crime
- protect public funds.

We may check information we receive about you with what is already in our records. This can include information provided by you, as well as by others, such as other government departments or agencies and overseas tax and customs authorities. We will not give information to anyone outside HM Revenue & Customs unless the law permits us to do so. For more information go to www.hmrc.gov.uk and look for Data Protection Act within the Search facility.

4 Multiple agents

If you have more than one agent (for example, one acting for the PAYE scheme and another for Corporation Tax), please sign one of these forms for each.

5 Where to send this form

When you have completed this form please send it to:

HM Revenue & Customs Central Agent Authorisation Team Longbenton Newcastle upon Tyne

There are some exceptions to this to help speed the handling of your details in certain circumstances. If this form:

- · accompanies other correspondence, send it to the appropriate HM Revenue & Customs (HMRC) office
- · is solely for Corporation Tax affairs, send it to the HMRC office that deals with the company
- is for a High Net Worth or an expatriate customer, send it to the appropriate High Net Worth Unit or the Manchester Expat Team
- · accompanies a VAT Registration application, send it to the appropriate VAT Registration Unit
- · has been specifically requested by an HMRC office, send it back to that office.



PayPartners

Please fill in the whole form including official use box using a ball point pen and send it to:

La Si M	and alb tre an	cas	stria Ro rd es	ad	Of		e C	er	itre	•							
Nam	e(s	of	acco	ount	hol	der(s)										
																	\dashv
																	- 1
Bank/building society account number																	
			.5 -		., .											1	
Brar	nch	sort	coc	le													
												l					
Nam				osta	al ad	ldre	ss o	f yo	ur b	ank	or b	uild	ling	SOC	iety	soc	ioty
10.	ille	vialia	igei										Dai	INDU	illullig	SUC	ец
Add	ress																\dashv
										Post	code						\dashv
										. 50							
Refe	ren	ce															_
				_											_		

Instruction to your bank or building society to pay by Direct Debit

6	9	7	2	2	0	
						-
	This is		AYPARTN			SE ONLY or building society.
	11115 15	not part of	tile ilistit	icuon to y	our bank	or building society.
	tion to y					
is Inst	truction s	subject to	the safe	eguards :	assured	ne account detailed in by the Direct Debit
ayPar		and, if s				remain with electronically to my
	ŭ	oloty.				
	ro(c)					
Signatu	10(3)					
ignatu						
ignatu Pate						

Banks and building societies may not accept Direct Debit Instructions for some types of account

DDI1

This guarantee should be detached and retained by the payer.

The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit, PayPartners Ltd will notify you 10 working days
 in advance of your account being debited or as otherwise agreed. If you request PayPartners Ltd to collect a payment,
 confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by PayPartners Ltd or your bank or building society, you are entitled to
 a full and immediate refund of the amount paid from your bank or building society
 - If you receive a refund you are not entitled to, you must pay it back when PayPartners Ltd asks you to
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify PayPartners Ltd.

PayPartners

PayPartners Ltd, Lancastrian Office Centre, Talbot Road, Stretford, Manchester M32 0FP

Tel: 0161 864 1625: Freephone: 0800 515 620

Fax: 0161 872 2444

E-mail: payroll@pay-partners.co.uk

<u>Checklist</u> - All items (except where marked *) must be completed as 'Yes' for PayPartners to process this payroll service application.

Item	Page Number	Completed
Completed application form	2	Yes / No
Signed Agreement	3	Yes / No
Attached ID in accordance with requirement	3 & 4	Yes / No
Completed Questionnaire	5	Yes / No
Completed details for PA 1 plus tax statements	6 & 7	Yes / No
Completed details for PA 2 (if applicable) plus tax statements	8 & 9	Yes / No
Social Worker to Complete declaration in lieu of ID issues*	10	Yes / No
Completed HMRC document FBI 2	11	Yes / No
Completed HMRC document 64-8	13	Yes / No
Completed Direct Debit Mandate	15	Yes / No

www.pay-partners.co.uk

PAYP1034 Iss 2 12/2012