



# **New Client Application Pack**

Please complete all sections and return it to the address on the back page of this application.

Local Authority:	
Clients Name:	

IMPORTANT NOTE: All these forms need to be completed in the name of the person who is in receipt of the Direct Payment/Personal Budget/Health budget Funding, and when this is a child, in the name of the parent or guardian responsible.

Welcome to Barrie Bookkeeping & Payroll Solutions Ltd payroll and pensions administration service. The following forms have been put together as simply as possible to enable you to understand and complete them. There are quite a few forms but the details are essential to ensure your payroll and pension scheme are set up correctly. Once we have all the information you can be sure that we will be able to manage everything smoothly for you.

There are step by step instructions inside but if you need any help, or have any questions, just give us a call on **0800 599 9353**.

### **Pre-Paid Debit Cards**

If your local authority has provided you with a debit card to receive your funding then it is possible that we may have to arrange to collect the funds from you in a slightly different way, depending upon which card you have.

Some cards will allow you to set up a Direct Debit or Standing Order instruction so that we can collect the wage payments for your Carer(s) using our standard method. With the consent of the relevant Local Authority, other card providers can allow us to collect the wage payments automatically by allowing us third party access to their online services (see 2.4.3 in our terms and conditions).

If you have a card and are unsure about how it will work, then please give us a call on **0800 599 9353** and we will let you know which payment option is suitable and get everything set up for you.

Over the next few pages, we outline our promise to you. This explains what you can expect when you deal with us, from our great service to our focus on all aspects of customer care. We also outline our charges, so you know exactly what you are paying for.

Once you have read this section, please sign where indicated to confirm you are happy with the service we offer, and that you would like to use **Barrie Bookkeeping & Payroll Solutions** services.

Please sign this part of the document on page 10. We will send a copy of the agreement to you when we do your first payroll calculation.

WHAT'S INCLUDED?	SERVICE LEVEL 1	SERVICE LEVEL 2	SERVICE LEVEL 3	SERVICE LEVEL 4	SERVICE LEVEL 5
Paying of invoices for Care Agency	V	×	×	×	~
Setting up of payroll.	×	V	V	V	~
Compliance checks with HMRC.	×	V	~	~	~
Calculating employee salaries.	×	V	~	V .	V
Auto Enrolment calculations & support.	×	V	V	~	~
Taking on HMRC responsibilities.	×	V	V	~	V
All starters/leavers processed.	×	V	~	~	~
Calculating any statutory pay.	×	V	~	V	V
Redundancy pay calculations.	×	V	~	~	~
Attachment orders.	×	V	~	V	~
Calculating Holiday Pay.	×	V	~	~	~
Recording of any holidays.	×	V	V	~	~
No year-end reporting costs.	V	V	V	V	V
Dealing with and processing any holiday cover.	V	V	~	~	V
Auto Enrolment Set up*	V	V	~	~	v .
Employment Liability Insurance*	~	V	~	~	~
Payment of PAYE to HMRC	×	×	~	V	V
Payment of Employees	×	×	×	V	V
**Provision of employment contracts	×	×	×	V	~
**Access to legal guidance & advice	×	×	×	V	V
**BBPS Advertise a vacancy service	×	×	×	×	V
**Provision of interview space & support	×	×	×	×	V
**Up to 5 hours of telephone support*	×	×	×	×	V
Budget Management.	V	×	×	×	V
**Employment Support	×	×	×	×	~
**DBS Checks*	×	×	×	×	~
**Right to work in the UK checks*	×	×	×	×	V

On this form we simply need your basic details so we know who you are and can set you up as an employer with HMRC. You can also let us know the best way to get in touch with you. There are forms later in the booklet for you to give us details of your PA(s).

#### Your Details (Essential information)

Your Name:	JOHN SMITH
Address:	1 EXAMPLE AVENUE
	EXAMPLEVILLE
	EXAMPLETON
	EX5 4PL
Home Teleph	none No. 045 928 1780
Mobile Telep	hone No.
Your NI Num	ber:
Email Addres	ss: JOHN@EXAMPLE.COM

If you have given us your email address we will use it to send all your payroll statements and payslips to you electronically. If you would prefer to receive them in the post, please tick here

#### Your Payroll Instructions:

Are you using Direct Payments or other funding to employ carers already?  If yes, what is your PAYE reference number:	Yes	No
If you have used a payroll service before, please tell us which one as we may need to about your payroll:	contact the	m for information
Would you like to set up an Automatic Payroll? Please read Guidance Note 2 carefully, as this service may not be available for you.	Yes	No
Please tell us here if you have authorised anyone to deal with payroll matters on you	r behalf?	
Which local authority/council provides your funding?		
Carers are normally paid on a 4-weekly basis. If you have made an agreement to pay (i.e. monthly or weekly) please tell us here:	your carer c	on any other basis
Any other payroll instructions:		

- 1 If you already use a payroll agent they can provide you with your PAYE reference number. We will need to know how much you have already paid your employees in the current tax year so we can ensure the correct information is given to HMRC. Your previous payroll agent will be able to tell you this, please ask them to send us a copy of your payroll file. Without this information we may not be able to pay your Carer(s) correctly.
- 2 Automatic Payroll: We can (if your local authority permit) set your payroll up so we automatically pay your Carer/PA without you having to do anything (send timesheets to us etc) the Carer is paid the same number of hours each time we calculate a payroll unless you tell us otherwise. This can work if your Carer works the same hours on a regular basis. Let us know here if you would like us to do this for you. Please bear in mind that you will be required to keep timesheets (ideally signed by you AND your Carer) to back up the payments made to your Carer(s) and we strongly recommend that you do so.
- 3 Most local authorities send your funding payment every 4 weeks and most of our clients choose to pay their Carer(s) every 4 weeks in line with their funding. You can of course choose how often you pay your Carer i.e. Weekly, Monthly or 4 weekly just let us know here.

*Your Name:				
Address:				
ome Telephone No.				
Mobile Telephone No.				
Your NI Number:		*Your Date of Birth:		
Email Address:				
ou have given us your email address we will use it to se he post, please tick here	nd all your payrol	l statements and payslips to you ele	ctronically. If you wou	ıld prefer to receive the
our Payroll Instructions:				
re you using Direct Payments or other fundir	ng to employ c	arers already?	Yes	No
yes, what is your PAYE reference number:	.0	,		
you have used a payroll service before, pleas	se tell us which	n one as we may need to con	act them for info	rmation about
our payroll:				
Would yo <b>IMPORTANT</b> - Please read Gu	u like to set up	an Automatic Payroll? Yes/N	lo ot he available for	VOLL
Please tell us here if you have authorised anyo				you.
rease tell as here il you have authorised unive	one to dear with	pay, eacce. e e y e a s e		
Which local authority/council provides your fu	The second secon			
Carers are normally paid on a 4-weekly basis. monthly or weekly) please tell us here:	If you have ma	ade an agreement to pay you	r carer on any oth	ier basis (i.e.
Horiting of Weekly, please tell as fiere.				
Any other payroll instructions:				
my other payron monature.				
nvoices:				
ou will be invoiced on or around the 12th of e	very month. *I	Please confirm: (circle where	appropriate)	
nvoices to be posted direct to Service User:	Yes/No			
nvoices to be emailed direct to Service User: f yes, please provide e-mail address:	Yes/No			
nvoices to be posted to another person:	Yes/No			
f yes, please provide name and address:				
Vages/PAYE:				
arrie Bookkeeping & Payroll Solutions can pay	/ wages to you	r PA & PAYE to HMRC on you	r behalf, if reques	ited.
Nages/PAYE: Barrie Bookkeeping & Payroll Solutions can pay Please confirm: (circle where appropriate) I would like to make all payments to my PA ar			r behalf, if reques	rted.

I would like BBPS to pay only the payments to HMRC on my behalf, and I will pay wages to my PA myself:

I would like BBPS to make all payments to my PA and HMRC on my behalf:

Yes/No Yes/No

# **Auto Enrolment Workplace Pension Scheme**

As a new Employer you will be required to provide a workplace pension for your PA/Carer no later than 1st February 2018. Set out below are the dates by which you must have a pension scheme in place:

Date You First Employ your PA /Carer	Date you must have a Workplace Pension by
After 1st October 2017	Immediately

### **Your Pension Scheme Options**

The good news is that you have no need to worry about providing a pension scheme as we can take care of all the requirements for you. Our pension administration service will ensure that you comply with all your statutory responsibilities, including:

- All statutory communication with all your staff
- Setting up your compliant workplace pension scheme, including filling in your declaration of compliance with The Pensions Regulator
- · Assessing your workers and enrolling them in to a compliant workplace pension scheme
- · Calculating pension contributions and paying them over to your scheme provider

All you need to do is choose a **Workplace Pension Provider** from the list set out below. (We have also included the current charges so that you are clear on how much each provider will cost).

	Barrie Bookkeep	ing and Payroll			
	Solutions Charge	2S	Provider Charge	S	
Provider	Initial Set Up	Annual Charge	Initial Set Up	Annual Charge	Tick to choose
Nest	£100*	FREE**	FREE**	FREE**	
Peoples Pension	£100*	FREE**	£600**	FREE**	

If you do not specify a particular provider, we will use the NEST Pension solution as your default workplace pension scheme provider. If you would like to use any other pension provider, please let us know. Our charges for processing files for any other provider are available upon request.

If you are in any doubt about which provider to choose we strongly advise you to seek independent financial advice from a professional advisor.

\* To keep costs down, all our pension communications are sent to your PA's by email free of charge. If we need to send letters to your PA's for you there will be an additional charge of  $\pm 0.83$  per letter.

\*\*All prices quoted are correct as at 1st April 2019

*How are your Direct Payments received?  Pre-paid Card  Bank Account  Council Managed	Please Provide *Sort Code *Account Number	





PAYROLL AND	PENSIONS ADMINISTRATION SERVICES AGREEMENT dated	20
between		

Barrie Bookkeeping and Payroll Solutions Ltd (Registered number SC411894) of Suite 1, Airlie House, Glenrothes KY6 2AG ('we' or 'us'), and ('you')

2 (Print name and address)

Title:	Full Name:
Address:	
7 (3.1. 2.2.)	
Postcode:	

#### 1. INTRODUCTION

We provide payroll and pension management services. You wish us to calculate amounts due and pay salary to persons employed by you. We will provide those services on the terms set out in this agreement.

In this agreement 'Personal Assistant' (PA) means a person employed by you and for whom we provide payroll and pensions management services to you.

#### 2. SERVICES

- 2.1. We shall calculate the wages due and any tax or other payments in respect of PA's notified to us by you. We will make those calculations using information that you provide to us.
- 2.2. We shall only take instructions to calculate or make payments from persons that you have authorised to do so. You must give us that authorisation in writing.
- 2.3. We shall agree with you how often you want us to pay your PA and the information that you will need to send to us to allow us to calculate the payments.
- 2.4. We shall provide the following services:
  - 2.4.1. For each payment period we shall calculate the payment due to each PA after making the necessary deductions and provide you with a printed payslip for each PA with a copy for your records;
  - 2.4.2 If you ask us to, we will return to you the timesheets that you give us after we have filled in the payment details on those timesheets;
  - 2.4.3 Every time we make a payroll calculation for you we will send you a report which will set out clearly the money that we will:
    - (a) instruct to be paid to us from your prepaid debit card account; or
    - (b) request you to make a payment to us using such prepaid debit card, (at our option and absolute discretion).
  - 2.4.4 Where we request you pay us by prepaid debit card under (c) above we will tell you the date and time by which you must make a payment to us. In the event you do not make such payment by the requested date, we reserve the right to instruct such sums to be paid to us directly from your prepaid debit card account.
  - 2.4.5. Where you instruct us to we will register as your agent and we will register for online filing with the Revenue and Customs service. We shall also instruct Revenue and Customs to contact us electronically;
  - 2.4.6 We will store securely all your payroll records for at least 3 years;
  - 2.4.7 At each year end we will produce P60 forms for each PA;

- 2.4.8 We will make payments directly to each PA's bank account if you have given us the money to make those payments by the time that they are due to be made;
- 2.4.9 We will make payments on your behalf electronically to the Revenue and Customs if you have given us the money to make those payments by the time that they are due to be made:
- 2.4.10 If you believe there has been an error in any payments made or taken under this section, please contact us directly on our Freephone number. We will investigate this promptly and will ensure that where any error has been made, we will refund any additional sums taken within 10 Business Days.
- 2.5. We shall provide the services to you using reasonable care and skill and in accordance with all laws that apply.

#### 2.6. PLEASE NOTE CAREFULLY that:

- 2.6.1 We will not be responsible for losses or expenses caused by any miscalculations that we make due to you or a PA giving us incorrect or incomplete information;
- 2.6.2 Where we suffer any loss or damage as a result of any act or omission by you or any of your officers, employees, agents or sub-contractors, you will indemnify us for such loss or damage, including (but not limited to) situations where monies have been paid to a PA by direct debit, and you invoke a direct debit guarantee in respect of such monies.
- 2.6.3 Where you owe us any monies pursuant to this Agreement (including under 2.6.2 above), we shall, be entitled to set off any such debt against any monies owed to you.
- 2.6.4 We will do whatever we reasonably can to make the calculations at the right time, but we will not be responsible for any losses or expenses caused by us receiving information from you too late to allow us to make calculations in time for a PA's contractual pay date.
- 2.6.5 Where you have a prepaid debit card for use in making payments to us and the money that we ask you to provide to us is not paid by the date and time that we have given you for payment, it may result in your PA not being paid or not being paid on time.
- 2.7 You confirm that we are appointed as your agent and authorised to perform all necessary administrative tasks for the purpose of processing your payroll, providing you with a pension management service and for dealing with all relevant third parties on your behalf including (by way of example and not by way of limitation):-
  - 2.7.1 HM Revenue and Customs (HMRC) (where we will register for online filing and instruct HMRC to contact us electronically); and
  - 2.7.2 National Employment Savings Trust (NEST) for all purposes relating to the provision of a pension for the PA including (by way of example and not by way of limitation) agreeing to NEST's Employer Admission Agreement electronically and agreeing to NEST's terms and conditions on your behalf.
  - 2.7.3 The Pensions Regulator for all purposes relating to Pension scheme registration, compliance declarations and statutory record keeping.

#### 3. **EMPLOYMENT OF PA'S**

- 3.1 You agree that we are not and will not become the employer of any PA as a result of entering into this agreement. You will compensate us fully for any loss or damage that we may suffer as a result of anyone claiming that we are the employer of a PA.
- 3.2 You agree that you will remain the employer of each PA and are responsible for all the obligations of an employer towards each PA.

3.3 By entering into this agreement, you confirm that you have obtained informed consent from all PA's for their personal data to be released in accordance with the terms of this agreement and that said PA's have signed the consent statement set out in the PA information form.

#### 4. ENDING THIS AGREEMENT

- 4.1 This agreement will start on the date given at the top of the first page.
- 4.2 Either you or us can end this agreement by giving one months' notice in writing to the other. This agreement cannot be ended in any other way unless you and we both agree.
- 4.3 Ending this agreement will not affect any rights that we or you already have on the date that it ends, including the right to be compensated for losses that either you or we have suffered.

#### OUR CHARGES

### 5.1 OUR PAYROLL CHARGES

You agree that you will pay our charges for carrying out these services for you. Our charges are:

£15.00 per 4 weeks, for up to 4 PA's

£17.50 per 4 weeks for 5 - 9 PA's

£0.71 per BACS payment (paying employee's wages from our account)

£0.71 per item of postage

#### 5.2 **OUR PENSION ADMINISTRATION CHARGES**

#### 6.2.1 PENSION START UP CHARGES

Our set up costs vary dependent upon which pension scheme provider you have chosen to use. They are:

NEST £100

The People's Pension £100 + £600 = £700

This is a one-off charge made at the time we set up your scheme for you. These charges include all the initial set up, administration and compliance for your workplace pension scheme

#### 6.2.3 PENSION COMMUNICATION CHARGES

We try to keep our charges as low as possible so all our pension communications to your PA's are sent by email free of charge. If we need to send letters to your PA's there will be an additional charge of £0.83 per letter.

- 5.3 We shall collect our charges from you either;
  - by direct debit from your account at the same time as we collect the payments that are due to your PA's; or
  - by other automated form of collection (where possible).

Where we collect our charges by direct debit, you must ensure that there is enough money in your account to pay for our charges on the day that we make the direct debit.

Where it is not possible to collect our charges by direct debit or other automated form of collection, we will inform you of the date and time by which you must make payment to us and you must make the payment to us by that date and time.

# In addition Value Added Tax (VAT) is payable on those charges at the standard rate.

5.4 If we want to increase our charges, we will tell you at least 2 months before the increase is to take effect so that you have time to end this agreement if you so wish.

#### 6. **OTHER MATTERS**

- 6.1. We shall not be required to carry out any of the services or any of our other duties under this agreement if we are unable to do so as a result of anything that is beyond our reasonable control. Things beyond our reasonable control will include, but not limited to:
  - changes to laws or other government policies
  - extreme bad weather or other acts of God
  - strikes or other industrial disputes
  - riots or other civil commotion
  - · breakdowns in bank systems
- 6.2. This agreement is personal to you and you may not pass on your rights and obligations under it to any other person unless we agree in writing.
- 6.3. If any part of this agreement is declared to be illegal, invalid or unenforceable that part shall be deemed to be removed from this agreement. This agreement shall continue between us, but without the removed part.
- 6.4. You agree that this agreement sets out all the terms of the agreement between us. Any previous agreements between us relating to the services shall have no effect and you shall not be able to rely on their terms. It does not matter whether those previous agreements were made only by word of mouth or were in writing.
- 6.5. This agreement is made under English and Scottish law. Any claims under this agreement may only be made in the English and Scottish courts.

Signed by you or on your behalf

Print name and relationship if signing on behalf of the receiver of the services

Print Name:	Date:	 Relationship:	

## What happens next?

Thank you for taking the time to complete this application pack. You should now return the whole pack to us in the prepaid envelope provided. It's important that you send the form to us in the post as both our Bank and HMRC require us to obtain original documents.

As a guide, please check that you have completed the following: (Tick the white box)
☐ Filled in all the essential information on page 5
☐ Included your email address if you have one
☐ Chosen your Workplace Pension Provider & completed bank details on page 6
☐ Completed personal details on page 7
☐ Signed the service agreement on page 10
☐ Completed employee forms on page 13 & 15

If for any reason you don't have a prepaid envelope, call our team on  $\bf 0800~599~9353$  and we will happily send one out to you .

Once we have received this back through the post we will:

- Check it and contact you if we have any queries.
- Set up your payroll account with us
- Set up your Direct Debit instruction with your bank
- Contact you again to confirm that your payroll is set up and ready to go
- Set up your Workplace Pension in readiness for your staging date

We will complete all the above within 10 working days of receiving your completed pack.

Your support from Barrie Bookkeeping & Payroll Solutions starts now, so if you have any queries or questions don't hesitate to give us a call on 0800 599 9353 and we will be pleased to help.

Thank you again for choosing Barrie Bookkeeping & Payroll Solutions to support you as your payroll and pension administration provider.

Employee's personal details	
1 Last name	
SMITH	5 Home address
	1 EXAMPLE AVENUE
2 First name(s) Do not enter initials or shortened names such as Jim for	EXAMPLEVILLE
James or Liz for Elizabeth	EXAMPLETON
JANE	Postcode EX5 4PL
3.4.2	Country UNITED KINGDOM
	6 National Insurance number (if known)
3 Are you male or female?  Male Female	N A 1 2 3 4 5 6 E
	7 Employment start date DD MM YYYY
4 Date of birth DD MM YYYY  0 1 0 5 1 9 6 8	0 1 0 4 2 0 1 7
Employee statement  8 You need to select only one of the following state  A This is my first job since last 6 April at	itements A, B or C  and I have not been receiving taxable Jobseeker's Allowance, taxable Incapacity Benefit,
Allowance, Employment and Support A State or Occupational Pension.	Allowance, taxable Incapacity Benefit,
B This is now my only job but since last Jobseeker's Allowance, Employment a I do not receive a State or Occupations	t 6 April I have had another job, or received taxable and Support Allowance or taxable Incapacity Benefit. al Pension.
C As well as my new job, I have another	job or receive a State or Occupational Pension.
9 Do you have a Student Loan which is not fully	repaid and all of the following apply:
You have left a course of higher edu     You have received your first Studenty	cation before last 6 April. t Loan instalment on or after

Carers should have a P45, if not they need to fill this in. This should be completed by your chosen Carer if they do not have a P45 form, and handed back to you.

Your Carer should fill in their National Insurance Number (they can find this on a payslip, or any letter from HM Revenue & Customs), their name, date of birth and address details. After completing tick options A B or C and the student loan question, they should sign and date at the bottom of the form where indicated.

PLEASE NOTE: The following pages are copies of the forms on these two pages and must be completed for <u>all additional Carers</u> that you have chosen to employ. If you have more Carers and need additional forms you can download them from **www.barriebookkeeping.co.uk** or call us FREE on **0800 599 9353** and we can send some to you.



# **Starter Checklist**

Emplo	yee's personal det	ails				
1	Last name or family name			Home address		
			] 5			
2	First name(s) Do not enter initials or s as Jim for James or Liz fo		]	Postcode Country		
			6	National Insurance number (if known)		
3	Are you male or femal					
	Male Femal		7	Employment start date DD MM YYYY		
4	Date of birth DD MM Y					
	8 Payroll IC (if you ha	or works number ve one)				
	Employee's pe	ersonal details				
	9 You need	to select only <u>one</u> of	the followi	ing statements A, B or C		
	Α	oril and l have not been owance, Employment and oacity Benefit,				
	This is now my only job but since last 6 April I have had another job, or received taxable Jobseeker's Allowance, Employment and Support Allowance or taxable Incapacity Benefit. I do not receive a State or Occupational Pension.					
	C	As well as my new job Pension.	o, I have and	other job or receive a State or Occupational		
	10	You hav You hav	e left a cours	not fully repaid and all of the following apply: se of higher education before last 6 April. our first Student Loan instalment on or after  No Yes		



Signed:

Date:

This form is for you to give us details of your Carer/PA, who is your employee. We need a form for **EACH** of your Carers, together with a P45. If your new Carer(s) does not have a P45 to give you, they will need to fill in the Starter Checklist which you must send to us with their Employee Details form. Without a P45 or the Starter Checklist they may pay more tax than they should, so it is very important to make sure we have one or the other.

Employers Name: JOHN SMITH		7			
Your Carers Details:		7			
Title: Mr Mrs Miss Ms		7			
Surname: MAY		7			
First Name(s): MARY		7			
Address: 1 EXAMPLE AVENUE					
EXAMPLEVILLE					
EXAMPLETON					
EX5 4PL					
		This			
Date of Birth:	2.09.1995	should b			
National Insurance Number:	JS 03 10 15 B	complete by you			
First Date of Employment	1.08.16				
Agreed Hourly Pay Rate	£ 10	_			
Agreed Weekly Working Hours	20 HOURS				
Carers Contact Phone No.	07671237498				
Carers Email Address marymary@example.com					
If your employer has arranged to have your salary transferr and Payroll Solutions Ltd, please complete the bank details:					
Bank Name: TSB					
Branch:	EXAMPLEVILLE				
Sort Code: (6 Digits)	01-42-68				
Account Number: (8 Digits)					
Reference No. (If Building Society)					
Account in Name Of: (If Different from above)					
If you would like us to hold your emergency contact de	etails on file, please complete the section below	1.			
Emergency Contact Name:	ANNA MAY				
Relationship:	MOTHER				
Emergency Contact Telephone Number:	07534521986				
	07534521986  details are completed I confirm that this nto, I understand that this is subject to the eping and Payroll Solutions Ltd and my	_			
Solutions to hold these details on file and release					

Please enter your name on the first line of this form. (i.e. the person who is receiving Direct Payments, Individual Budgets or other funding) and complete the agreed hourly rate section.

The rest of the form should be filled in by your chosen Carer.

If your chosen Carer does not have a P45 form, they should also complete the starter checklist on the opposite page.

If you need more forms, just call us on **0800 599 9353** and we can arrange for more to be sent to you, or you can download them from **www.barriebookkeeping.co.uk** 



# Employee's personal details PLEASE PRINT CLEARLY USING BLOCK CAPITALS

Employe	ers Nam	e:									
Your Ca											
Title: Mr Mrs Miss Ms											
Surnam	e:										
First Na	me(s):										
Address	:										
								-			
Date of	Birth:					T					
Nationa	l Insurar	nce Num	ber:								
First Dat	e of Em	ploymer	nt								
Agreed						£					
		Norking	Hours								
Hours to	work - if th	ne same									
Day	Mon	Tues	Wed	Thu	Fri	Sat	Sun	Week to	otal		
Hours											
Payment Frequency as agreed by the employer please tick  Weekly Fortnightly 4-weekly Monthly											
Carers Contact Phone No.											
Carers E	mail Ad	dress									
								account via		Bookkeepir	ng
Bank Na	me:		·								
Branch:											
Sort Cod	de: (6 Dig	gits)									
Account Number: (8 Digits)											
Reference No. (If Building Society)											
Account in Name Of: (If Different from above)											
If you would like us to hold your emergency contact details on file, please complete the section below.											
Emergency Contact Name:											
Relationship:											
Emergency Contact Telephone Number:											
that this is subject Solution Bookkee my emp	is the ket to the second to th	oank aco contra nd my e nd Payro	count I v ctual ar mploye oll Solut	wish to rangem r. If em	have ments be ergency hold the	y salary etween details ese det	/ paid i Barrie s are co ails on	re compl nto, I und Bookkee impleted file and i	dersta ping a Lauth	and that t and Payro horise Ba	his oll irrie
Signed: Print Name:											



FOR OFFICE USE ONLY		CONTRACTOR OF CAMERA	
Local Authority Name		Client Name	
Code		Client Code	
		, , , , , , , , , , , , , , , , , , , ,	
FOR LOCAL AUTHORITY US	SE ONLY - IMPORT	ANT PLEASE FILL IN	
Support Worker Name			
Support Worker Email			
Support Worker Phone			
For Office Use Only: Essential information National Insurance No. HMRC Agent Form Signed HMRC Online Form Pension Choice (ticked and) si Service Agreement Signed Employee Details Call/Postcard	igned	Welcome Letter Welcome Pack HMRC Registration Completed SW Welcome Email Set Up Completed Administrator	

# **Address & Contact Details**

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