



Workstream Candidate Payment Details

Please complete the details requested below, then fax this form along with copies of all necessary permits and certificates to 0870 116 6181 or post to Candidate Services, Workstream Construction Services Ltd., The Old Stables, Newton Morrell, BICESTER OX27 8AG.

CONTACT DETAILS

<i>Title (Mr, Ms, Dr, etc.)</i>	<i>First Name</i>	<i>Last Name</i>
<i>Address</i>	<i>Home Phone</i>	
	<i>Mobile Phone</i>	
	<i>Home Fax</i>	
<i>Postcode</i>	<i>Email</i>	

PERSONAL DETAILS

<i>Date of Birth (dd/mm/yyyy)</i>	<i>Nationality</i>	<i>Passport No. if non-EU citizen</i>
<i>Work Permit Supplied</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>National Insurance Number</i>	<i>Marital Status (tick one only)</i> <input type="checkbox"/> Single <input type="checkbox"/> Married

PAYMENT DETAILS

<i>Preferred Company for Payroll Processing</i>	<i>Tax Status (tick one only)</i> <input type="checkbox"/> PAYE <input type="checkbox"/> CIS <input type="checkbox"/> Limited Company
<i>Preferred Means of Payment (tick one only)</i> <input type="checkbox"/> Directly into bank account <input type="checkbox"/> Cheque	<i>Deduct Union dues? (tick one only)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Company Registration or CIS Number (if applicable)</i>	<i>Limited Company Name (if applicable)</i>

BANK/BUILDING SOCIETY DETAILS

<i>Bank/Building Society Name</i>	<i>Bank/Building Society Branch Location</i>
<i>Bank Sort Code (6 digits)</i> - -	<i>Building Society Reference Number (16 digits)</i>
<i>Account Name</i>	<i>Bank Account Number (8 digits)</i>

SIGNED DECLARATIONS

I would like to register with Workstream and/or with my preferred payroll processing company (if applicable) and confirm that all the information given above is correct. I accept that Workstream is registered to hold and process this information under the terms of the Data Protection Act 1988 and that the company will release it to third parties only where this is necessary for the processing of my payments or is legally mandated by the appropriate authorities. I understand that if I use a payroll processing company, I am liable for my own tax and National Insurance contributions and I accept that the money I receive in payment for my work is inclusive of holiday and sickness pay entitlement unless alternative arrangements are agreed in writing.

<i>Signature</i>	<i>Date (dd/mm/yyyy)</i>
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Workstream has witnessed and filed evidence of any permits and/or certificates claimed above.

<i>Name of Workstream Representative</i>	<i>Signature</i>
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