



Dear Candidate,

In accordance with the legislative amendments introduced by HMRC in 2015, it is now a legal requirement for us to inform HMRC of any payments made to you on behalf of our clients. To comply with this obligation, we kindly request the following details from you. Failure to provide the complete information below may affect our ability to transfer funds to you, which have been received from our clients.

**PAYROLL INFORMATION**

PERSONAL DETAILS
Title:
Forename:
Surname:
Date of Birth:
Gender:
Current Address:
City:
County:
Postcode:
NI Number:
Passport Number:
BANK DETAILS
Account Holder Name:
Sort Code:
Account Number:
UTR Number (If Self-Employed):
COMPANY REGISTRATION DETAILS (IF APPLICABLE)
Registration Type: Ltd Company / LLP
Company Name:
Company Registration Number:
Sort Code:
Account Number:
Date Registered:
Registered Address:
City:
County:
Postcode:

**CANDIDATE DECLARATION**

I confirm the accuracy of the information provided, regarding my employment status in the United Kingdom. I take full responsibility for ensuring that I report all payments received for services rendered to Recruit Meds clients to HMRC UK. Additionally, I verify that I am compliant with all UK Tax legislation as prescribed by the UK Government, ensuring that all UK taxes owed on payments received from my clients through Recruit Meds are duly remitted to HMRC UK.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

