

**AGENCY WORKERS DETAILS**

Surname: (Mr / Mrs / Miss / Ms) \_\_\_\_\_

First Names: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Post Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

National Insurance Number: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Next of Kin: \_\_\_\_\_

Relationship: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**PAID BY:** BACS/CHQ

Bank/B.Soc: \_\_\_\_\_

Branch: \_\_\_\_\_

Sort Code: \_\_\_\_\_

A/c Number: \_\_\_\_\_

Name on A/c: \_\_\_\_\_

B.Soc Reference: \_\_\_\_\_

**PAYE FORMS:**

P45 Form                  P46 Form                  Nothing attached

Signature:

Date: