

Withdrawn

This publication is withdrawn.
The publication is no longer current.

Youth Contract

Wage Incentive – Bank Account Details

Please use **BLACK** ink and capitals throughout, and complete all boxes that apply.

Part 1: Employer Details

Employer Name	<input type="text"/>
Employer Address	<input type="text"/>
Telephone Number	<input type="text"/>
Contact Name	<input type="text"/>

Part 2: Employer Bank Details

Bank/Building Society Name	<input type="text"/>	Sort Code	<input type="text"/> <input type="text"/> <input type="text"/>
Branch Name	<input type="text"/>		
Branch Address	<input type="text"/>		
Bank Account Name	<input type="text"/>		
Bank Account/Building Society Roll Number	<input type="text"/>		
Remittance Advice Address (if different to Part 1 as above)	<input type="text"/>		

Part 3: Authorised Signatories

The names and specimen signatures of people authorised to sign Wage incentive claim forms on behalf of the employer are shown below. These signatures are binding on this organisation in respect of claims submitted for payment.

Name	<input type="text"/>	Name	<input type="text"/>
Position	<input type="text"/>	Position	<input type="text"/>
Signature	<input type="text"/>	Signature	<input type="text"/>
Date	<input type="text"/>	Date	<input type="text"/>

Part 4: Employer Declaration

- I certify that the information given on this form is correct
- I agree that following discussions, any overpayments can be automatically recovered from future payments

Signature

Name

Date

Data Protection Act 1998: The information on this form will be recorded on a computer system. The information provided will be used for paying your fees and will not be passed to anyone outside of DWP or Purchase to Pay.

Return this form to your payment processing centre at the following address:

**Payment Validation Team,
Wallasey Jobcentre Plus,
Dominick House,
St Albans Road,
Wallasey.
CH44 5XY.**

Signature

Name

Date

Part 5: For DWP Use Only (for completion by DWP)

Tick one Box only

Set up a new supplier/site record for the organisation named overleaf (RM7 Action)

Amend the existing record for the organisation named overleaf – Now complete the box below

Use the "supplier" window on RM to obtain the following details:

Supplier name

Site name

Signature

Name

Date

Grade

Tel No