

# Application Form - Additional Information

**Additional information required to register Scheme with HMRC.**

HM Revenue & Customs (HMRC) require the additional information requested below to enable the Scheme to be registered. Please note these are the current requirements for HMRC registration and are subject to change.

**The information captured on this form will be used by Rowanmoor to pass on to HMRC for the purposes of registering the Scheme. Personal information for directors of the employer, who are not members of the Scheme will be destroyed once registration has been confirmed and it will not be used for any other purpose. Other information supplied will be held in the strictest confidence and subject to the provisions of Data Protection Legislation. Please refer to the Group Privacy Notice for more information.**

# Additional Information

## Employer details

Please confirm the number of employees currently employed by the principal employer and any proposed additional participating employer.

Principal Employer

Participating Employer

Is the principal employer or any proposed additional participating employer registered for VAT?

YES  NO

If yes, please provide the VAT reference for the principal and any proposed additional participating employer.

Principal Employer

Participating Employer

If the principal employer or any proposed additional participating employer has been at the address detailed on the Application Form for less than 12 months, please provide the previous address:

Address

Postcode

Has the principal employer or any proposed additional participating employer been dormant for any period during the last 12 months?

YES  NO

If yes, please provide details.

## Company directors

Please complete the following information for all directors of the principal and any proposed additional participating employer. Please photocopy this page and complete for additional directors as required.

Address

Date of birth  Postcode

If resident at the above address for less than 12 months, please provide the previous address:

Name

Address

National insurance number

Unique taxpayer reference number

If the Director does not have a Unique Taxpayer Reference number please confirm the reason:

Telephone Number (inc. area code)

Email Address

## Scheme member

If the member has resided at the address detailed on the application form for less than 12 months, please provide the previous address.

Previous address

	Postcode	

Previous address

	Postcode	



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If you require this document in audio, large print or Braille format, please telephone 03445 440 550 or fax 03445 440 500.