

If not already shown, please enter your name and address in this box to make sure that we can deal with your claim

Your reference
Tax reference

Year to: 5 April

How to fill in this form

Please fill in this form with details of your income for the above tax year. The enclosed Notes will help you (but there is not a note for every box on the form). If you need more help with anything on this form, please phone us on the number shown above.

If you are not a UK resident, do not use this form - please contact us.

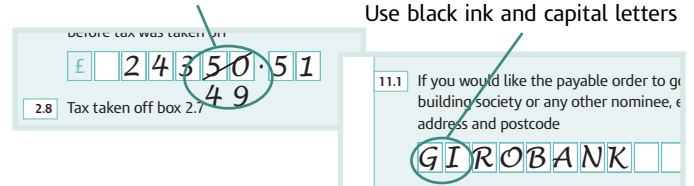
Please do not send us any personal records, or tax certificates or vouchers with your form. We will contact you if we need these.

Please allow four weeks before contacting us about your repayment. We will pay you as quickly as possible.

This form is designed to be read by machine - please follow the completion instructions so that it may be read correctly:

- write inside the boxes, using black ink and capital letters
- if you make a mistake, cross it out and write the correct information below it
- leave blank any boxes or sections that do not apply to you - please do not strike through them.

Cross out any mistakes and write the correct information below



Personal details

<p>1.1 Date of birth DD MM YYYY</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<p>1.4 Your contact phone number(s)</p> <p>Your phone number</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>1.2 National Insurance number</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<p>Your agent's phone number</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>1.3 Name and address - if it is different from above. Please write the correct details underneath the wrong ones, and put 'X' in the box</p> <input type="checkbox"/>	<p>1.5 If this is an interim claim and you expect to receive more income before the end (5 April) of the above tax year, put 'X' in the box</p> <input type="checkbox"/>

