



If your address is not shown complete the box below

Issued by
HM Revenue & Customs
PAYE
PO Box 1970
LIVERPOOL
L75 1WX

Please complete the reference numbers in the boxes below.

SA reference

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Employer PAYE reference (if applicable)

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National Insurance number

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Date DD MM YYYY

D	D	M	M	Y	Y	Y	Y
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Phone number

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For our opening hours go to www.hmrc.gov.uk

What to do now

Date received by HM Revenue & Customs

Please:

- complete and sign this form using capital letters, and
- return it to the address shown at the top right of page one.

Details of claimant

Surname

First name(s)

Address

Postcode

Claim

I claim repayment of the amount overpaid by me.

For **non-SA claims** please state below the period the claim relates to. From *DD MM YYYY*

				2	0		
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To *DD MM YYYY*

				2	0		
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If you complete a Self Assessment tax return

- We will usually send your repayment direct to you or your nominee's bank or building society account. Please include in the Authority below:
 - the name and address of the nominee
 - the account name and number (*if appropriate*), and
 - the branch sort code.
- If you or your nominee does not have a bank account, we can arrange repayment in the form of a payable order but you or your nominee will need to open a bank or building society account in order to cash it. If the repayment is to go to your nominee by payable order, enter the nominee's name and address in the Authority below.

Claimant's signature

Date *DD MM YYYY*

				2	0		
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If you do not complete a Self Assessment tax return

- We will make your repayment in the form of a payable order, which must be paid into a bank or building society account. If you do not have a bank or building society account you should nominate someone who does to receive the order for you.
- If you want the repayment sent to a nominee or posted direct to your bank or building society by payable order, enter the name and address in the Authority below. Also include your account number and sort code if the payable order is to go direct to your bank or building society account.

Authority

I authorise

nominee agent *tick as appropriate.*

Enter the name of the account holder or the person who will receive the payable order.

of full address

to receive the amount due on my behalf.

Agent's reference *if appropriate.*

Your Your nominee's *tick as appropriate*

Name of account holder

Bank or building society account number

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Branch sort code

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Address of bank or building society where account is held

Postcode

Claimant's signature

Date *DD MM YYYY*

				2	0		
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