

**COMMUNITY ACCOUNTANCY SERVICE LTD
EMPLOYER'S PERMANENT INFORMATION SHEET**

COMPANY/ORGANISATION NAME

ADDRESS

Contact names

Telephone

POST CODE

e-mail

fax

PAYE Tax District_____

Reference_____

PAY DATE_____

Cut Off Date_____

Normal working week_____ **hours Full Time** (eg 35, 37.50)

Pay Method cash / cheque / autopay / BACS / other (delete as appropriate)

Calculation basis for part month

Basic pay normally based on 261 or 365 (delete as appropriate)

Holidays Normally based on 261ths of annual salary

Other Requirements eg pension deductions, mileage payments

Signed _____

DATE _____