

Pay and Workers Rights: Individuals

Q1. Are you worried about non-payment of national minimum wage?	
Please select	

Q2. Do you or the person you are filling this out for, work in the agriculture, forestry, food processing, food packaging or shellfish gathering?

Please select

Q3. Are you supplied by an Agency?

Please select

Q4. Are you worried about being forced to work more than an average of 48 hours per week?

Please select

If you have answered "Yes" to Q2 only then complete this form.

If your answer is yes to Q4, and you work in shops, hotels, bars, restaurants, cafes, sports and leisure, residential care homes or consumer services you should contact your <u>local</u> <u>authority</u> as they enforce working time rights at these types of businesses. For other types of business such as manufacturing, construction, public sector, agricultural, education, energy sectors please continue. For all complaints about minimum wage please also continue.

When you have completed the whole form above and below then please email it to <a href="mailto:fpt.hmrc@hmrc.gsi.gov.uk">fpt.hmrc@hmrc.gsi.gov.uk</a>

### **Personal Details**

Please select your employment status or the person you are complaining on behalf of
Please select

Name	Click here to enter text.
Address	Click here to enter text.
Contact Details	Click here to enter text.
Date of Birth	Click here to enter text.
NI Number	Click here to enter text.
Contact Method	Please select.
Telephone	Click here to enter text.
Email	Click here to enter text.
Letter	Click here to enter text.
When would be the best time to contact you	Click here to enter text.

Are you happy for an officer from the enforcement body to contact you about the information that you are providing?

Please select

## **Employer Details**

Name	Click here to enter text.
Address	Click here to enter text.
Contact Details	Click here to enter text.
Type of Business Plea	Please select
	Other Details: Click here to enter text.

Do you know how many other people work for this Employer/Agency?	
Please select	

Do you still work for this Employer/Agency?	
Please select	

If Yes: \	If Yes: When did you start with the Employer OR when did you register with the Agency?	
Click here to enter text.		
If No: what period did you work?		
From:	Enter a date	
To:	Enter a date.	

Are you also happy for us to use this information when we contact the Employer/Agency you are complaining about?

Please select

Is the Employer/Agend	cy aware that you are contacting us?
Please select	

# **Details of Complaint**

Complaint	
Click here to enter text	
	_

# Additional information

How often are you paid?	Please select
How many hours do you normally work in	Click here to enter text.
this period?	
How are you paid?	Please select
What is your gross pay?	£ Click here to enter text.
What is the agreed rate of pay (hourly rate)?	£ Click pere to enter text.
Have you signed an agreement to work more	Please select
than 48 hours a week on average?	
How many minutes of rest break are you	Click here to enter text.
allowed each day you work (including	
lunch)?	
Do you have a contract of employment?	Please select
Are you undergoing or have you undergone	Please select
an apprenticeship or any other form of	
training with the employer involved?	
Do you receive any additional payments (i.e.	Click here to enter text.
commission, konus payments etc.)	
Do you work 3 hours or more between	Please select
10:00pm and 7:00am?	
Is your accommodation provided by your	Please select
Employer?	
Are there any deductions made from your	Click here to enter text.
pay other than Tax, National Insurance and	
Pension Contributions? e.g. for training,	
transport. Accommodation, etc.	
Have you been charged a fee by the Agency	Please select
for finding your work?	
Do you have any documents, including	Click here to enter text.
contracts or terms and conditions, payslips,	
assignment notes, timesheets, emails,	
letters, texts, etc? [Provide brief details]	



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BIS/15/256