Access to Work

jobcentreplus

Claim for travel costs during working hours

Part of the Department for Work and Pensions

Important – if this is your first claim, or your payment details have changed since your last claim, please ask for a 'New or amended details' form.

Part 1 Customer details					
Title		liss Ms Other			
Surname		Other names			
AtW ref number Email addres			6		
Part 2	Daily claim detail	S			
Details of jou	rneys at work during the period	d:			
From	/ /	to		/	/
Date	From	То	Taxi fares	Public transport rate	Mileage
If you need to	o tell us about more journeys.	Total cost of taxis	£	Total mileage	

If you need to tell us about more journeys, please ask for another claim form.

Total amount paid by you in this period	£	Please attach original receipts or invoices. If you do not have the originals, please attach certified copies.
Your contribution	£	Public transport cost or standard mileage rate agreed with your Access to Work adviser.
Employer contributions	£	Employer mileage rate contribution or employer car allowance.

£

Amount claimed from Access to Work

Deduct all contributions from the total amount paid.

DP227JP 04/11

Please turn over

Part 3 Employer's declaration

I certify that the person named in Part 1 of this form has been at work for all of the dates shown in Part 2.

Signature		Position	
		Company address	
Name			
Date	/ /		

Part 4 Customer declaration

- I have travelled during work using the method agreed with Access to Work on the dates shown in Part 2 of this form.
- I want the payment to be made to
- I understand that if I knowingly give information that is incorrect or incomplete I may be liable to prosecution or other action. Claims may be subject to validation and information may be checked with other sources including employers, suppliers and providers.
- I have read the Access to Work 'Information for Customers' and agree to its terms.
- No part of this claim has been included in any previous claim.
- I understand that Access to Work will not accept claims for reimbursement that are made more than six months after costs were incurred.
- I claim reimbursement of the portion of my costs agreed with Access to Work.

Signature		
Name		
Date	/	/

Part 5 Return details

When you have filled in this form send it to

Jobcentre Plus Access to Work Operational Support Unit Anniesland Jobcentre Mail Handling Site A Wolverhampton WV98 1DB