Wiltshire CIL Payroll Service

END OF EMPLOYMENT FORM

Please complete and send this form to us whenever an employee leaves your employment. We will then process the employee's final wage as normal and send their P45 directly to their home address.

Should you wish to take advice on your employee leaving, please contact the Peninsula Employment Helpline (provided under your Employer's Liability Insurance policy) on 0344 892 2480 or advice@peninsula-uk.co.uk, quoting your policy number and the code FIS033

PLEASE RETURN BY 15TH OF THE MONTH TO BE INCLUDED IN THAT MONTH'S PAYROLL

Employer's Name	

Employee Details	
Employee's name	
Employment start date	
Employment termination date	
Number of complete years' service	

Reason Employment Ending	
☐ Resigned with notice ☐ Resigned without notice ☐ DP stopped/reduced by Wiltshire Council	☐ 'Cared For' moved into care/hospital ☐ 'Cared For' deceased ☐ *Other (please provide details below)

Payment Instruction For Payroll		**Details**
Outstanding hours worked to be paid	YES/NO	
Payment in Lieu of Notice	YES/NO	
Holiday pay entitlement	YES/NO	
Redundancy entitlement (show calculation)	YES/NO	
Deductions from final pay	YES/NO	

Declaration	
I agree with the above details and confirm that these payments are due to the employee.	
Employer's Signature:	Date:

Office Use Only:	
Person starting this form	
Date form started	
Cared for (if different from Employer)	
Notified by (name/organisation)	