



EMPLOYERS SCHEDULE APPLICATION

Please write clearly.

SECTION I: Employer Details

EMPLOYER NAME (s) *in full*
or Limited Company Name _____

TRADING AS *if different from above* _____

COMPANY REGISTRY NUMBER *if appropriate*

Please provide details of beneficial owner (s) and shareholding:

DATES OF BIRTH *if appropriate*

ADDRESS _____

_____ POST CODE _____

CONTACT NAME _____

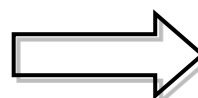
TELEPHONE NUMBER (s) _____

E-MAIL ADDRESS _____

The nature of your business _____

The date upon which you commence employing

Please complete the
section overleaf



Social Security

Edward T. Wheadon House, Le Truchot, St. Peter Port, Guernsey GY1 3WH

SECTION II: Schedule Details

Please provide the number of Employees paid:

WEEKLY

MONTHLY

Do you wish to:

USE RETURNS CREATOR? Follow: rc.gov.gg ¹ ☐

THIRD PARTY SOFTWARE
please provide name

¹ Returns Creator provides employers with an alternative to handwriting Social Security and Income Tax Quarterly returns. By calculating and totalling contribution liability automatically, time is saved and errors in calculation are avoided.

This product is web based and compatible with Apple, Windows and any operating system using current versions of the most popular web browser.

Signature _____ Date _____

For Official Use Only

Employer Pack Issued

System Set Up (Employers)

System Set Up (Inspectors)

Economic Code

Approved

Perry's Ref

Registration of Owner / Employer
Social Security Number

Initials

Date

Description

Survey / Area

Initial Survey carried out by _____ Date _____

Notes
