

SALARY DEDUCTION FORM

To: Progress Care Housing Association Limited Summer House 21 King Street Leyland Lancashire PR25 2LW (" Progress Care ")	United Lincolnshire Hospital NHS Trust 101 Manthorpe Road Grantham Lincolnshire NG31 8DG (the " Trust ")
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Name: * _____

Address: * _____

Post: * _____

Payroll Number: _____

Effective Date of Authority: * _____

Tenancy Code: _____

This is the reference number must be quoted on all payments

Rent: £ _____

Council Tax: £ _____

Service Charges: Nil

Full Monthly Charges: £ _____
(Rent & Council Tax)

Dear Sirs,

Authority to Deduct Monies from Salary

For the purpose of the Employment Rights Act 1996 ("ERA"), I consent to the Trust deducting from my salary any sums which may from time to time be owing by me to Progress Care.

Without any limitation, I also expressly authorise the Trust to deduct any monies I may from time to time owe to Progress Care in respect of rent, service charges, council tax and any other accommodation related charges which may be lawfully and legitimately levied upon me. As at the date of this authority such sums amount to the rental charge expressed above. I also authorise the Trust to provide details of my payroll number to Progress Care to assist with the processing of these above payments.

I understand that I will be provided with a schedule of proposed deductions by the Trust 10 days before any deduction is made from my salary and I accept that I will be deemed to agree with the level of proposed deduction unless I notify Progress Care and the Trust in writing of any dispute within 3 days of having received the schedule. I further understand that, should the amount of my liability change, this authority shall remain in force and shall include such other amounts as are notified to me in respect of my liability for charges at the above address.

I further acknowledge that for so long as Progress Care provides me with accommodation, I may not contractually withdraw this consent and should I purport to do so for the purposes of the ERA. The Trust will be entitled reasonably to terminate my employment by serving me with written notice for Some Other Substantial Reason.

Signed _____

Date _____

Date passed to Payroll _____

