

Holiday Pay Remediation Claim Form

This form is for former New Zealand employees to complete if they have received notification that they are owed a payment as part of the Holidays Act Remediation Project.

This form should only be used if you are not submitting your claim online through the F&P website.

This information will be used to match you to your employment data.

Claim Details

Claim Reference Number required

From the top right hand corner of your claim letter if you have received one

Past Employee Number required

Identified in your letter if you have received one.

First Name required

Surname required

Date of Birth (dd/mm/yy)

By including your date of birth, we can process your claim more quickly.

Name Changes

Has your name changed since you were a F&P employee? required

☐ Yes

☐ No

If Yes: complete the below

Previous First Name

Previous Surname

You will need to provide documentation showing the name change from old to new, e.g. a marriage certificate or a statutory declaration.

Current Contact Details

Address 1 required

Address 2

City/Town required

Postcode

Country required

Email Address required

This may be used for correspondence and/or payment information

Preferred Contact Method required	<input type="radio"/> Email	<input type="radio"/> Post
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Payment Details
<i>Payment will be made into a New Zealand bank account only.</i>

Bank Account Number required			-				-						-		
<i>Please ensure you check that the bank account number you have entered is correct.</i>															

IRD Number required									
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Tax Code required	
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Are you a contributing Kiwisaver Member? required	<input type="radio"/> Yes	<input type="radio"/> No
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If Yes: complete the below

Please select your contribution rate	<input type="radio"/> 3%	<input type="radio"/> 4%	<input type="radio"/> 6%	<input type="radio"/> 8%	<input type="radio"/> 10%
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Required Documentation Checklist
<p>Please attach and include these documents with your claim. Please ensure the documents are captured clearly and can be read.</p> <ul style="list-style-type: none"> ○ IRD330 required - This contains your tax code, IRD number and signature. You can download the IR330 form from here ○ KS2 required, if contributing to Kiwisaver - You can download the KS2 form here ○ Identity verification required <ul style="list-style-type: none"> ○ Any one of birth certificate, passport, certificate of citizenship, Immigration New Zealand visa, driver's license, or Kiwi Access (formerly HANZ 18+) card. ○ Please note: if your identity document has text on both sides (e.g. driver license), both sides need to be scanned for it to be accepted. ○ Proof of name changed <i>Please attach documentation showing the name change from old to new, e.g. a marriage certificate or a statutory declaration</i>

Declaration	
<input type="radio"/> I confirm that I am the person named in this application and that the details I have provided are true and correct. required	
Your Signature	
Date	

Once you have completed this form, please scan and email this along with your required documentation to HolidaysAct@fphcare.co.nz