



# Annual Zone Card Loan Application Form



Once complete please return to Douglas McIntosh, Travel Plan and Systems Manager, West House, Gartnavel Royal, G12 0XH

### Part 1: Applicant Details (Please Print)

Full Name: \_\_\_\_\_ Home Address: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Post Code: \_\_\_\_\_  
 Ward/Department: \_\_\_\_\_ Home/Mobile number: \_\_\_\_\_  
 Hospital: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Work Telephone: \_\_\_\_\_ Zonecard Start Date (Must be a Sunday): \_\_\_\_\_

### Part 2: Journey Details

From: \_\_\_\_\_ To: \_\_\_\_\_  
 Zones required (please refer to Zonecard map):  

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Total Number of Zones Required (up to a maximum of 12 zones)  
 Insert "ALL" if all zones are required

If you purchase 3 Glasgow zones, you will have the freedom to travel in all Glasgow Zones (G1 to G8.)

\*Price of Zonecard £  \*Monthly/Weekly Payments £   
 I am: Weekly Paid  Monthly Paid  (Please Tick as appropriate)

### Part 3: Pay Details

<b>Staff Pay Number</b>		<b>Pay Div</b>	<b>Grp code</b>	<b>Pay Pt</b>
G <input style="width:100px;" type="text"/>		<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text"/>
<b>Date Commenced in NHS Greater Glasgow</b>		<input style="width:100px;" type="text"/>		

### Part 4: Authorisation - I agree to the following conditions

- I Undertake to repay the sum borrowed \*(insert price of annual Zonecard) £ \_\_\_\_\_ at a rate of \*(insert monthly/weekly repayments) £ \_\_\_\_\_ over 12months/52 weeks.
- If I Leave the employment of NHSGG&C or my employment is terminated before repayment has been made in full or if I otherwise breach the conditions of this loan agreement I authorise Payroll to deduct the outstanding Balance from my final salary.

**I have read fully and understand the attached Terms and Conditions. Achievement**

<b>Signature of Applicant</b>	
<b>Date</b>	