UK Travel and Subsistence Claim for non-civil servants

Section 1 – Claimant’s Details

For processing purposes, if either your claimant details or bank/building society details have changed since your claim, please tick this box: ☐

Full Name:

Rank profession or occupation:

Home Address: Contact Tel No:

Name of Board/ Commission/Committee

Section 2 – Travel

You should provide full details of your journey. Receipts should be attached. For mode of travel please use one of the following codes:

A – Air
B – Bus
C – Car
M – Motor Cycle
PC – Pedal Cycle
R1 – Rail 1st Class
R2 – Rail 2nd Class
SL – Sleeper
T – Tube
TX – Taxi

Journey Details

<table>
<thead>
<tr>
<th>Date</th>
<th>From</th>
<th>To</th>
<th>Mode</th>
<th>Rate</th>
<th>Miles</th>
<th>Fares/Other £</th>
<th>Sub-Total £</th>
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Total

Motor Car/Van

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<tr>
<th>Miles</th>
<th>Standard Rate</th>
<th>Rate</th>
<th>Miles</th>
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<tbody>
<tr>
<td>0-1000 Miles</td>
<td>40p Per Mile</td>
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<td>Over 1000 Miles</td>
<td>Lower Rate 25p Per Mile</td>
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Passenger Allowance

| Allowance | Employee on Business | 5p Per Mile |

Motor Cycles/ Bicycles

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<tr>
<th>Mode</th>
<th>Standard Rate</th>
<th>Rate</th>
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<tr>
<td>Motor Cycles</td>
<td>24p Per Mile</td>
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<tr>
<td>Bicycles</td>
<td>20p Per Mile</td>
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Section 3 – Purpose of visit – Please say why it was necessary to make this journey.
Section 4 – Subsistence

Day Allowances

A day subsistence allowance may be claimed for an absence from home when on official business. The rates payable are as follows:

£4.25 – for a period of 5-10 hours
£9.30 - for a period of over 10 hours (if lunch is provided at no charge please reduce the claim by £4.25, if dinner is provided please reduce the claim by £5.05)

You can claim an additional allowance for an early morning start providing all the following apply:

i) You were away for more than 12 hours:
ii) You left home 1.5 hours earlier than your normal time
iii) You did not have breakfast at home

This allowance is £4.25 or, if you travel by train or ferry the cost of a breakfast if you provide receipts

Overnight Stays

You may claim for the cost of your bed and breakfast on actual expenditure. For each 24 hour period of absence you may also claim a flat rate of £21.00. This allowance is for lunch (£4.25), dinner (£14.05) and travel between hotel and duty office (£2.70). Where meals are provided at no extra cost you must abate your claim by the amounts shown in brackets.

An Incidental Expenses Allowance of £2.90 can also be claimed in addition to the 24 hour flat rate. This allowance is for newspapers, telephone calls home and laundry.

When staying with friends/family you may only claim the 24 hour flat rate of £21.00.

You must give the reason for any exceptional expenditure (e.g. purchase of a meal on an ‘actual’ basis) and any receipts must be attached.

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<tr>
<th>Date</th>
<th>Start Time</th>
<th>End Time</th>
<th>Rate £</th>
<th>Bed &amp; B’fast £</th>
<th>Incidental &amp; Other £</th>
<th>Remarks</th>
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Sub-totals: 

Section 5 – Total Claimed and Cost Allocation – For Official Use Only

<table>
<thead>
<tr>
<th>Total Claimed £</th>
<th>Cost Centre Code</th>
<th>NAC Code</th>
<th>Prog. Code</th>
<th>Amount £</th>
</tr>
</thead>
<tbody>
<tr>
<td>1032</td>
<td>374110</td>
<td>SRM0480</td>
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Section 6 - Method of Payment

Direct to Bank/Building Society

Name: 
Address: 
Bank Account Holders: 
Sort Code: 
Account Number: 

Section 7 - Claimants Declaration

I declare that the expenses detailed above are correct in accordance with DTI regulations and were actually and necessarily incurred by me on DTI business. I have not previously claimed for any item on this claim. All receipts are attached and explanations of expenditure are given.

Signed: ____________________________ Date: ____________________________

Please send completed form to: Andrew Kitney, Department of Trade & Industry, 151 Buckingham Palace Road, Bay 207, London, SW1W 9SS

Section 8 - NMS Use Only - Countersigning Officer’s/MAC Secretary’s Declaration

I am authorised to countersign by my Directorate. I have ensured that the necessary abatements have been made. The work to which the claim relates was authorised. Receipts are attached and explanations of expenditure are given. The claim form is correctly completed.

Signed: ____________________________ Date: ____________________________

Name: ____________________________ Tel No: ____________________________

After countersigning, send form to AMEY plc, 7th Floor, Clarence House, Clarence Place, Newport, NP19 7AA

Section 9 - AMEY Use Only

Date Received: _______________ Date Paid: _______________ Voucher No: _________ Authorised by: _______________