

# Travel Expenses Form

## Part 1. PIP Claimant Details

National Insurance No.																				
Surname																				
First name																				
Home address																				
Postcode																				
Telephone																				

**NOTE:** Only the details of the claimant who is claiming for PIP should be detailed above, along with their signature in Part 5 below. Appointee/Recipient details should not be entered above, only claimant details.

## Part 2. Attendance Details

Centre attended																			
Date and time attended																			
Additional information:																			

## Part 3. Travel Details

Bus (return cost)	£	
Train (return cost)	£	
Car (total miles travelled)		miles
Taxi (return cost)	£	
Other	£	
If other, please specify:		

Receipts attached:  Yes  No

**NOTE:** Any companion expenses will need to be included on this expense form. You can claim the cost of your companion's journey from your home to the consultation centre, as well as the return journey from the centre to your home.

## FOR OFFICE USE ONLY

Checklist for approval:

Claimant details confirmed

Appointment date confirmed

Travel expenses confirmed

Change of circumstances confirmed

Yes  No  N/A

## Part 4. Payment Details

Please tick if you are an Appointee claiming on behalf of a Claimant   
(ticking the above you will be the recipient of the claim)

**Please tick the payment method you prefer**

**By Automated Credit Transfer** directly into Bank/Building Society account

**NOTE:** We cannot make payments by BACS into Building Society accounts identified by a Roll Number – in these instances the cheque payment option should be selected.

If the account is not in your name, put the name of the account holder here

Name																				
Sort code																				
Account number																				

**By Cheque** (sent to your home address, requires a bank account to deposit into, can't be cashed at a Post Office)

## Part 5. Declaration

**Warning:** giving false information may result in prosecution

I claim payment for expenses. I declare that the information I have given is true and complete to the best of my knowledge and belief, and that I am not entitled to claim these expenses from any other source.

Signature	
Date	

Claim assessed and payment is approved for the total sum of

£	
Signature	
Date	