

**Application for payment of travel, subsistence and/or loss of earnings expenses**

**1. Your name:**

**2. Your contact details:**

**Address:**

**Postcode:**

**Email:**

**Phone:**

**Your preferred way for the Inquiry to contact you about this application:**

**3. Why are you involved in the Inquiry (for example, are you a witness, supporting a witness etc.)?**

**4. Details of the expenses you are claiming:**

travel costs (if any)<sup>1</sup>:

meals and refreshments<sup>2</sup> (if any):

*Please attach receipts/tickets to this form, or provide an explanation as to why you are unable to do so*

**5. Compensation for Loss of Time**

Are you (please circle)

a) employed    b) self-employed    c) not employed/retired

a) If you are employed, will you be paid for this time absent from work?

If no, please provide evidence (for example, a letter from your employer)

Please provide details of the calculation of the amount you are claiming (e.g. number of hours and the amount of hourly pay or salary. You should provide evidence of the amount of your hourly pay, the number of hours of work you are missing etc. and attach it to this application):

b) If you are self-employed, please provide evidence of your daily rate of income by attaching it to this application and set out the calculation of the amount you are claiming here:

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<sup>1</sup> For travel expenses, please specify start and end point of travel, mode of transport, cost (or for mileage claims, distance travelled) and total. E.g. "Home – Queen Street Station, Bus fare £1.70. Queen Street Station – Edinburgh, train, £26.60 (return). Queen Street Station – Home £1.70. Total £30" Or "Home – Inquiry Premises, Car, 100 miles (50 miles each way), £45. Car parking charges £4. Total £49.

<sup>2</sup> Please specify the time you left home or your place of work to attend Inquiry business and the time that you arrived back there, or expect to arrive back there, together with the amount claimed.

**6. Your bank details (payment will be made direct to your bank account):**

**Name of bank:**

**Address of branch:**

**Name of account holder(s):**

**Account number:**

**Sort code:**

**DECLARATION**

**I confirm that the information I have given in this claim form (and any other documents I provide with it) is true and correct to the best of my belief and knowledge.**

**Your signature:**

**Date:**