

cake income management  
registration and management  
of single person limited  
companies for contractors  
and temporary workers.

Cake Single Person Limited Company  
& Membership Application Form



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## Cake Single Person Limited Company (SPLC) & Membership Application Form

PLEASE COMPLETE ALL OF THE INFORMATION SECTIONS BELOW.

Please print in CAPITAL LETTERS and return this form to Cake Income Management (post or fax to us) with all supporting documents. If you have any questions whilst completing this application, please call Cake on 020 79649 9681

### 1 - Your Details:

TITLE: Mr  Mrs  Miss  Other  (please state) \_\_\_\_\_

SURNAME: \_\_\_\_\_ FIRST NAMES: \_\_\_\_\_

ADDRESS: House Number/Name \_\_\_\_\_ Street: \_\_\_\_\_

Town: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ Postcode: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ National Insurance Number: 

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Home Telephone Number: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Are you an European Union National?

YES  NO  I am not an EU national and I enclose copies of (a) my work permit or other approval issued by Work Permits UK, and (b) a relevant document confirming my authority to stay in the UK and take the work in question. (A relevant document must be either a passport, other travel document or letter issued by the Home Office).

Tick here if you are a national of Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Slovakia or Slovenia.

### 2 - Provide us with a Password:

Because of the confidential nature of your relationship with Cake Income Management relating to subjects such as bank account details, it is vital to identify quickly that we are speaking to YOU personally and not someone using your name. Therefore, for security, when we talk to you on the phone, we will ask you for your password. Please write it on the line below. We will link it with your details in the Cake Income Management system and hold it confidentially. It must be between 5 AND 10 CHARACTERS and should contain both letters and numbers.

My Cake Income Management Password is: 

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### 3 - Your P45 Document:

I am enclosing/will send later a P45 form from my previous employer (delete as appropriate and attach to send)

If you are unable to obtain a P45, you must complete the P46 form that will be enclosed in the Cake Income Management Members' Introductory Pack that will be sent to you when your membership is accepted.

### 4 - Mobile phone text messages:

Cake Income Management provides a SMS text message service to your mobile phone to tell you your pay is on its way to your bank account. The message arrives with you on a Friday to save you calling to check with us. The money does not necessarily arrive at the same time as the message, but should be in your account by close of business on the same day.

If you agree to receive this free message service on the mobile phone number you have previously provided above, please tick the following box and sign below.

Signed \_\_\_\_\_

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### 5 - Your Job Title/Profession:

Job title/profession: \_\_\_\_\_

### 6 - Agency Details:

Name of Employment Agency/Company: \_\_\_\_\_

Name of agency contact: \_\_\_\_\_ Agency Branch: \_\_\_\_\_

Agency Tel No: \_\_\_\_\_ Agency Fax No: \_\_\_\_\_

Agency Email \_\_\_\_\_

### 7 - Bank or Building Society Details:

NAME OF BANK OR BUILDING SOCIETY: \_\_\_\_\_

SORT CODE: 

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ACCOUNT NUMBER: (8 digits) 

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ADDRESS: \_\_\_\_\_

ACCOUNT NAME: (e.g. Mr J Brown) \_\_\_\_\_

REFERENCE NO. (FOR BUILDING SOCIETY ACCOUNTS) \_\_\_\_\_

**NOTE: If this account is not in your own name, we will need written authorisation from the account holder confirming that we can pay your earnings into this account (please contact us for appropriate form).**

If you do not currently have a bank account, please contact us as we may have an alternative solution.

### 8 - Does IR35 apply to you?

IR35 is tax legislation introduced in the 2000/2001 tax year to ensure that individuals who work through a limited company and receive a portion of their income as salary, and a portion as dividends are properly entitled to do so. The following questions will help us to assess whether or not this is a factor in your circumstances.

Do you work for more than one client at any time? ..... Yes  No

Do you provide your own equipment to carry out your work? ..... Yes  No

Do you work under the close supervision of someone else? ..... Yes  No

Does your contract give you the right to substitute someone else to work in your place? ..... Yes  No

Do you advertise for new business? ..... Yes  No

# Cake SPLC & Membership Application Form

## 9 - Proof of Identification

Cake Income Management is required by law to verify your ID in advance of setting up your company, and to retain certain data on our records.

UNTIL WE HAVE RECEIVED APPROPRIATE VERIFICATION, WE CANNOT COMPLETE YOUR APPLICATION.

We offer you four different ways to provide us with your proof of ID. You **MUST** provide one document from SECTION 9.1 and one from SECTION 9.2 below. If you are having difficulties, please contact us on 020 7649 9681.

### SECTION 9.1:

Any **one** of the following providing evidence of your name:

- Signed, current Passport
- EEA Member State Identity Card
- Residence permit issued by Home Office to EEA nationals
- Current UK or EEA photo-card Driving Licence
- Current full UK driving licence (not old style provisional licence)
- Benefit book or original notification letter from the Benefits Agency
- National Identity Card containing your photograph

### AND...

### SECTION 9.2:

Any **one** of the following (being different from the document used for name and photograph above) providing evidence of address:

- Confirmation from an electoral register search that a person of that name lives at that address
- Recent utility bill or statement, or a certificate from a utilities supplier confirming an arrangement to pay for services on pre-payment terms
- Local council tax bill for current year
- Current full UK driving licence
- Bank, building society or credit union statement or passbook containing current address
- Recent original mortgage statement from a recognised lender
- Solicitor's letter confirming recent house purchase or land registry confirmation of address
- Local council or housing association rent card or tenancy agreement
- Benefit book
- EEA Member State identity card
- Inland Revenue self-assessment statement or tax demand
- House or motor insurance certificate

### Choose one of these ways to provide your ID:

1) You must either send us the ORIGINALS of 2 documents (we will then copy and return them to you as soon as possible) by registered post,

### OR...

2) Take the ORIGINALS of the 2 documents, together with this application form, to an approved third party who will verify your identification, copy the original documents, sign each page of these copies, then complete and sign the statement below. Examples of these include your bank or building society, your doctor (GP) or a solicitor, (please call us if you are not sure who is an 'approved' third party). **Remember to send the signed copies when you return this form to us.**

I confirm that \_\_\_\_\_ (e.g. Mr J Bloggs) provided me the originals of 2 forms of documentary Identification. I have signed and dated copies of these documents, and I confirm that they are true and accurate copies.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

Name: \_\_\_\_\_

Capacity in which you are signing (eg Doctor, Solicitor, Bank Manager etc) \_\_\_\_\_

Company Name and Address: \_\_\_\_\_

\_\_\_\_\_

continued over . .

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### 9 - Proof of Identification continued

#### OR...

- 3)** Take the ORIGINALS of 2 documents together with this application form to your agency. Please ask an appropriate person to copy the documents, and to sign and date each page of the copies. Please also ask the same individual to complete and sign the statement below. **Remember to send the signed copies when you return this form to us.**

I confirm that \_\_\_\_\_ (e.g. Mr J Bloggs) provided me the originals of 2 forms of documentary identification. I have signed and dated copies of these documents, and I confirm that they are true and accurate copies.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

Name: \_\_\_\_\_

Name of Agency and Address: \_\_\_\_\_

#### OR...

- 4)** Please ask your agency to complete the statement below.

I confirm that the ID of \_\_\_\_\_ (e.g. Mr J Bloggs) has already been verified by us, and we have retained copies of 2 appropriate documents, one from the first column, and one from the second column above. We will supply copies to you on request.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

Name: \_\_\_\_\_

Name of Agency and Address: \_\_\_\_\_

## 10 - Where did you hear of Cake Income Management?

Friend / Colleague:  (If existing Cake Income Management Member, please give their Cake Income Management Reference Number) \_\_\_\_\_

Agency:  Web:  Other (please state):  \_\_\_\_\_

## 11 - Agreement to Terms

1. I confirm that I have read, understood and agree to Cake Income Management's terms and conditions
2. I understand that I will receive my payments through Cake Income Management Limited acting as an agent for the Single Person Company that will employ me.
3. I understand that Cake Income Management holds information about me for certain purposes, including (but not limited to) verifying ID, confirming entitlement to work in the UK, administering personal and pay records and otherwise as reasonably required to operate its business. I understand that I can request access to this information (subject to applicable exemptions) by contacting Cake Income Management.
4. I understand Cake Income Management will use information relating to me to notify me (by whatever means) of promotions, products or services offered by Cake Income Management and third parties business partners. By signing below, I consent to the foregoing use of my information for marketing and promotional purposes unless I indicate otherwise by contacting Cake Income Management.
5. By signing this application form, I am consenting to the processing of personal data (and sensitive personal data) as described above. Further, I agree to such data being released to third party (such as Trade Unions and insurance providers) where necessary for the foregoing purposes.
6. I agree that all the information supplied on this form is correct and true to the best of my knowledge.

SIGNATURE: \_\_\_\_\_ PRINT NAME \_\_\_\_\_ DATE: \_\_\_\_\_