## ellie nee

## ellie nee registration form

NAME: Rob Martin-Dale

EMAIL: rob@devon7t4.co.uk

TITLE: mr

PLEASE FILL OUT THE FOLLOWING INFORMATION:

FIRST NAME ON PASSPORT : Robert

**SURNAME**: Martin-Dale

ADDRESS: 1 Burns Close

Horsham West Sussex Rh12 5PE

**HOME TEL**: N/A

**MOBILE**: 07767 663253

EMAIL: rob@devon7t4.co.uk

**TWITTER**: [text-twitterhandle]

**GOOGLE** + PROFILE NAME : [text-googleplus]

**NATIONALITY**: British

**NEXT OF KIN NAME**: Emma Martin-Dale

**NEXT OF KIN CONTACT**: 07791 600622

DO YOU HAVE A WORK PERMIT OR VISA TO WORK IN THE UK?: NO

## **DO YOU HAVE ANY CRIMINAL CONVICTIONS? : NO**

REFERENCES:

REFERENCE 1. PLEASE FILL OUT THE FOLLOWING INFORMATION:

**COMPANY NAME:** KHWS limited

**START DATE**: May 2014

**END DATE** : Jan 2018

**POSITION HELD**: Freelance Motion Designer

LINE MANAGER NAME: Nick Brown

LINE MANAGER JOB TITLE : Mobile Creative Director

EMPLOYER ADDRESS: 27 St. John's Lane, London, EC1M 4BU, UK

**EMPLOYER PHONE NUMBER:** N/A

EMPLOYER EMAIL: NickB@khws.co.uk

REFERENCE 2. PLEASE FILL OUT THE FOLLOWING INFORMATION:

**COMPANY NAME**: Arc London

**START DATE**: June 2015

**END DATE**: Present

**POSITION HELD**: Freelance Motion Designer

**LINE MANAGER NAME**: Ryan Dilley

**LINE MANAGER JOB TITLE** : Digital Creative Director

**EMPLOYER ADDRESS**: 82 Baker Street, London, W1U 6AE

**EMPLOYER PHONE NUMBER:** N/A

**EMPLOYER EMAIL**: ryan.dilley@arcww.co.uk

PAYMENT DETAILS:

(PLEASE COMPLETE IF LOOKING FOR FREELANCE OR CONTRACT POSITIONS)

PLEASE SELECT A PAY TYPE : LTD

THE FOLLOWING INFORMATION IS REQUIRED FOR ellie nee PAYROLL AND HMRC INTERMEDIARY REPORTING - TIMESHEETS CANNOT BE PROCESSED WITHOUT THIS INFORMATION:

PLEASE SELECT A PAY TYPE : LTD

NAME OF LIMITED/UMBRELLA COMPANY: Devon7t4 Design limited

**LIMITED COMPANY UMBRELLA ADDRESS**: [text-ltdumbrellacompanyaddress3]

PLEASE SELECT A PAY TYPE [checkbox\* checkbox-paytype "PAYE" "LTD" "UMBRELLA COMPANY"]

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NAME OF LIMITED/UMBRELLA COMPANY REGISTRATION NUMBER: 08010842

**VAT REGISTRATION NUMBER:** N/A

**NI NUMBER** : JA 84 26 39 D

**GENDER**: Male

**DATE OF BIRTH**: 30/06/1974

WORKING TIME DIRECTIVE (PLEASE FILL OUT IF LOOKING FOR FREELANCE OR CONTRACT POSITION)

I CAN CONFIRM THAT I AM HAPPY TO VOLUNTARILY OPT OUT OF THE 48 HOUR WORKING WEEK, ALLOWING ME TO WORK MORE THAN 48 HOURS PER WEEK WHEN NECESSARY. IF I CHANGE MY MIND, I AGREE TO GIVE ellie nee 3 MONTHS WRITTEN NOTICE TO END THIS AGREEMENT. PLEASE SIGN BELOW

**TICK HERE**: YES

**DATE**: 11.07.2018