BARCLAYS

Credit Payment Recovery (CPR) CPR Claim Form (Customer Error and Bank Error forms)

Guidance Notes

This document provides guidance on how to complete the CPR Claim forms when making a claim under the industry CPR process. All information relates to both the Customer Error form and the Bank Error form unless specified.

Sending bank confirmation of due diligence

• Submitter at Agency Bank: Enter the name and contact number of the person at the Agency Bank who is dealing with this request. This person should be able to confirm that all due diligence has been completed as per section 4.1 of the CPR Operating Guide

• Submitter at Sponsor Bank: To be completed by Barclays.

Error Type

Indicates the error type. Use the Customer Error form when one of your customers has sent a payment in error. This field will say "Customer Error". Use the Bank Error form if you as the Agency Bank has sent a payment in error. This field will say "Bank Error". See section 3.1 of the CPR Operating Guide for description of error types.

Agency Bank CPR Reference

Agency Bank to enter their own reference. This field is free format.

Sponsor Bank CPR Reference

To be completed by Barclays.

Claim Date

Enter the date that your customer notified you of the claim or the date that you became aware of the claim.

Payment Date(s)

Enter the processing date of the payment that has been sent in error. Multiple payments sent from the same customer to the same recipient may be entered on one form.

Is payment date within 2 months of claim

The standard treatment of claims should be followed by receiving banks for all claims of payments up to 2 months old. The standard process is where the receiving bank should protect the funds and give their customer 15 working days-notice to dispute the claim. Claims for payments over 2 months old will usually be treated by the exceptions process whereby the receiving bank seeks debit authority from their customer. This is calculated per calendar month.

See also section 3.1.1 of the CPR Operating Guide.

Amount(s)

Enter the amounts of all payments being claimed on this form.

Channel Used

Enter the channel used by you or the customer to make the payment. E.g. internet, mobile, telephone, branch.

Payment Type

Enter the payment type of the payment sent in error, FPS (Faster Payment) or Bacs. CHAPS is out of scope for the CPR process.

Payment Reference (FPID)

For FPS sent in error, enter the FPID where known. This can be found on the Input report for payments sent using DCA (Direct Corporate Access).

Has payment gone to a Known Recipient? Yes / No

(Customer Error Form only)

Delete as appropriate.

If known recipient – what is the relationship with the customer?

(Customer Error Form only)

Where a payment has been sent to a recipient known to your customer, enter the relationship between your customer and that recipient.

Reason why the customer is unable to deal directly with the recipient to recover the funds.

(Customer Error Form only)

You must provide the reason from the customer that they are unable to liaise with the recipient directly. Where customers have sent a payment in error to a known recipient they should be encouraged to liaise directly with the recipient for the return of funds.

Customer Error Category

(Customer Error Form only)

Enter the appropriate Customer Error category and Sub Category from the list below.

Customer Error Category	Sub Category	
1. Incorrect account number and/or sort code or payment reference	A. Miskeyed digit(s) in the Account Number	Up to 2 mths – Protect & Give Notice
	B. Miskeyed digit(s) in the Sort Code	Over 2 mths up to 36 mths – Exception – Seek Debit Authority
	C. Completely Incorrect Account number and/or sort code used	
	D. Wrong account details provided by payee	
	E. Old account details used	
	F. Incorrect or no payment reference details given	

Customer Error Category	Sub Category	
2. Wrong payee selected	A. Wrong payee selected from list	Up to 2 mths – Protect & Give Notice
	B. Used default payee in selection list	Over 2 mths up to 36 mths – Exception – Seek Debit Authority
3. Duplicate or incorrect amount paid to correct payee	A. Same amount sent more than once	Up to 2 mths – Protect & Give Notice
	B. Incorrect amount – overpayment	Over 2 mths up to 36 mths – Exception – Seek Debit Authority
4. Forgot to cancel a payment already sent	A. Standing Order(s) not cancelled by customer	Up to 36 mths – Exception – Seek Debit Authority
	B. Future dated single payment not cancelled by customer	
5. Other (Unusual cases)	A. Payment sent too early/set up for wrong frequency (e.g. monthly not annually)	Up to 36 mths – Exception – Seek Debit Authority
	B. Other (explain in description)	

Bank Error Category (Bank Error Form only)

Enter the appropriate Bank Error category and Sub Category from the list below.

Bank Error Category	Sub Category	Recommended Treatment
6. Technical or system error	A. Bank system causes error to single payments e.g. digits in account details added or removed; duplicate payment sent B. Bank system causes multiple Faster Payment errors (only for cases where it has been agreed that CPR can be used – see scope in section 2.1 of the CPR Operating Guide) C. Other	A. Up to 2 mths – Protect & Give Notice B. Over 2mths up to 36 mths – Exception Seek Debit Authority
7. Human Error – single or regular payment	A. Incorrect account number or sort-code used B. Incorrect or no payment reference details given C. Duplicate or incorrect amount paid D. Failure to cancel a single payment instruction E. Failure to cancel a standing order F. Failure to amend the amount of a payment (assume reduce) G. Paid too early or set up for wrong frequency H. Other	A. Up to 2 mths – Protect & Give Notice (subject to evidence being available) B. Up to 2 mths – Exception Seek Debit Authority (if no evidence is available) C. Over 2mths up to 36 mths – Exception Seek Debit Authority

Recommended Treatment (Protect / Exception)

Delete as appropriate to indicate the treatment you recommend to be followed for this claim:

- Protect & Give Notice
- Exception – Seek Debit Authority.

See section 3.1.1 and 6.1 of the CPR Operating Guide for information about treatment options. See also the CPR Operating Guide Annexes for further details of each process.

Justification for Recommended Treatment

Give a full explanation of how the error occurred and where applicable detail:

- Purpose of the payment
- For mis-keyed digits - try to give information on what was mis-keyed e.g. digits transposed "56" instead of "65"
- If a completely wrong account number was used – how did this happen?
- If a payment has been made before to this recipient – what may have changed to make this payment an error?
- If an overpayment and the customer would like the full amount back – the reason why they don't want the difference to be returned
- Any other useful information

You must include justification for choosing Protect & Give Notice or Exception

Do not include sensitive customer information.

Recipient Account Details

- **Details of Actual Recipient.** Enter the account details of the account where the payment was sent in error
- **Details of Intended Recipient.** Enter the account details of the account where the payment was intended to be sent.

This customer sensitive information should be removed from the form prior to emailing the form to Barclays unless the form is emailed in a secure manner. The Barclays CPR team will contact the submitter of this form by telephone where we require additional information to trace the payment. A faster payment can usually be located using the FPID alone. This account information will usually be needed to locate a Bacs payment as a Bacs trace may be required.

Details of Sending Account

- Sort Code and Account Number of Agency Bank customer. Enter the account details of the Agency Bank customer (23xxxx xxxxxxxx) for payments sent directly from their account
- Sort Code and Account Number of Agency Settlement Account. Enter the account details of the Agency Bank's account at Barclays where the payment was debited from as part of settlement (20xxxx xxxxxxxx).

This sensitive information should be removed from the form prior to emailing the form to Barclays unless the form is emailed in a secure manner. In this case the Barclays CPR team will contact the submitter named at the top of this form by telephone to obtain this information.

Submission Channel

Enter the Barclays channel used to submit the payment. For example but not limited to: DCA (Direct Corporate Access), Bacstel-IP, File Gateway, Direct File.

Service User Number (Bacs only)

For Bacs payments only, enter the Service User Number (SUN) used to make the Bacs submission. (Not applicable for Bacs payments sent via Direct File).

Bulk File Amount

Enter the total file amount for payments that have been sent as part of a bulk file. This will apply to payments sent via Bacstel-IP and may also apply to payments sent via File Gateway and Direct File.

You can get this in Braille, large print or audio by calling 0800 400 100* (via Text Relay if appropriate) or by ordering online from barclays.co.uk/accessibleservices