

48 HOUR OPT OUT AND BANK DETAILS.

1 Definitions

1.1 In this agreement the following definitions apply:

* "Agency Worker" means _____ (candidate's name)

"Assignment" means the period during which the Agency Worker is engaged to render services to the Hirer,

"Hirer" means the person, firm or corporate body engaging the services of the Agency Worker,

"Employment Business" means HCR-SERVICES, of Aspire Ryde, Trinity Buildings, Dover Street, Ryde, Isle Of Wight, PO33 2BN

"Working week" means the average of 48 hours each week calculated over a 17-week reference period.

1.2 References to the singular include the plural and references to the masculine include the feminine and vice versa.

1.3 The headings contained in this agreement are for the convenience only and do not affect their interpretation.

2 RESTRICTION

2.1 The working time regulations 1998 (as amended) provide that the Agency Worker shall not on an assignment with the Hirer in excess of the working week unless s/he agrees in writing that this limit should not apply.

3 CONSENT

3.1 The Agency Worker hereby agrees that the working week limit shall not apply to the assignment.

4 WITHDRAWAL OF CONSENT

4.1 The temporary worker may end this agreement by giving the Employment Business 3 months notice in writing.

4.2 For the avoidance of doubt, any notice bringing this Agreement to an end shall not be construed as termination by the Agency Worker of an assignment with a Hirer.

4.3 Upon the expiry of the notice set out in clause 4.1 the working week shall apply with immediate effect.

5 THE LAW

5.1 These terms are governed by the law of England and Wales and are subject to the exclusive jurisdiction of the Court of England and Wales.

* Signed by the temporary worker _____

BANK DETAILS FORM.

Please complete the following for prompt payment of your wages;

Name: _____

Address: _____

Postcode: _____ Phone number: _____

Nat Ins No: _____ Date of Birth: _____

Email address: _____
(timesheets will be sent to this address)

Details of Bank/Building Society were you would like your pay to be sent:

Bank Name: _____

Town: _____

Account Name: eg. Mr M SMITH, _____

Account Number: _____

Sort Code: _____

Signature: _____ Date: _____

**PLEASE RETAIN, DETACH FROM CONTRACT AND RETURN TO HCR-SERVICES UPON
COMMENCEMENT OF FIRST ASSIGNMENT ALONG WITH VALID P45 OR P46**

Head Office

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