**New Partner: Initial Statutory Declaration of Eligibility**

Counter-signatories of this form, as well as employees, must read and understand the guidance notes overleaf before completing and signing this form. If completed incorrectly it will not be accepted.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Active or Retired Employee Details** | | | | | | | | | | | | | | | | | | |
| Title | | | |  | | | | | Address | | | |  | | | | | |
| First Name | | | |  | | | | |  | | | | | |
| Last Name | | | |  | | | | |  | | | | | |
| Home Phone | | | |  | | | | |  | | | | | |
| Mobile Number | | | |  | | | | | Postcode | | | |  | | | | | |
| Email: | | | |  | | | | | | | | | | | | | | |
| **New Partner Details** | | | | | | | | | | | | | | | | | | |
| Title | |  | | First Name: | |  | | | | | | Last Name: | |  | | | | |
|  | | | | | | | | | | | | Date of Birth: | |  | | | | |
| Does your partner already hold any rail staff travel facilities as an employee themselves, or as a dependant to another Employee? | | | | | | | | | | | | | | Yes | |  | No |  |
|  | | | | | | | | | | | | | | | | | | |
| **List of three different, recent acceptable proofs of address for each of you  that show you both live at the same address** | | | | | | | | | | | | | | | | | | |
| **Your 3 Proofs of Address** | | | | | | | | | | | **Your Partner’s 3 Proofs of Address** | | | | | | | |
| 1 |  | | | | | | | | | | 1 |  | | | | | | |
| 2 |  | | | | | | | | | | 2 |  | | | | | | |
| 3 |  | | | | | | | | | | 3 |  | | | | | | |
| (See overleaf for examples of documents which are acceptable proof. Please do not send these documents to RST). | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Statutory Declaration by the Active or Retired Employee** | | | | | | | | | | | | | | | | | | |
| I declare that I live with my partner, named above, as a co-habiting couple in a meaningful relationship and that we both permanently reside at the above address as our sole residence. Proof of residence, listed above, are all dated within the last 6 months and have been shown to the counter-signatory named below.  I make this Declaration conscientiously believing the same to be true by virtue of the Statutory Declarations Act 1835.  Further,   * I confirm that all details provided are correct. * I understand that I am responsible for the correct use of their rail staff travel facilities and understand that such use is subject to the Conditions of Issue and Use ([www.raildeliverygroup.com/rst/conditions-of-issue-and-use](http://www.raildeliverygroup.com/rst/conditions-of-issue-and-use)) * I understand that Rail Staff Travel’s privacy information is available at [www.raildeliverygroup.com/rst/rst-privacy](http://www.raildeliverygroup.com/rst/rst-privacy) and that I have read it and have made my partner aware of it. * If I am in any doubt about eligibility, I understand that I must check and that any attempt to obtain or use rail staff travel facilities fraudulently may result in disciplinary action, legal proceedings and the permanent withdrawal of all rail staff travel facilities for myself and all of my dependants. | | | | | | | | | | | | | | | | | | |
| Date | | |  | | | | Employee’s Signature: | | |  | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Declaration by the Solicitor, Notary Public, Magistrate or Commissioner for Oaths** | | | | | | | | | | | | | | | | | | |
| I confirm that the above-named has made this Statutory Declaration before me and has shown me the evidence listed above, in accordance with the guidelines published online. I therefore believe this declaration to be true. | | | | | | | | | | | | | | | | | | |
| Court/Firm Name | | | | |  | | | | | | Signatory Name | | | |  | | | |
| Court/Firm Address: | | | | |  | | | | | | Notary seal or Court/Firm Stamp  (if not available, attach a letterhead) | | | |  | | | |
| Date of Admission | | | | |  | | | Signature of counter-signatory: | | | | | | |  | | | |

**Guidance on Completing Form xx03 – New Partner Declaration**

The Counter-signatory of this form must be a Solicitor, a Notary Public, a Magistrate or a Commissioner of Oaths who is legally qualified to witness a Statutory Declaration under the Statutory Declarations Act 1835.

This signature must be supported by a Notary Seal, Court Stamp, Firm Stamp or Firm Letterhead.

The counter-signatory must not witness or countersign this form unless the required 3 separate documentary proofs of address for both the employee and their partner have been supplied. Any alterations to the form must also be counter-signed.

The counter-signatory and the employee must read and abide by these Guidance Notes before completing and signing this form.

You do **not** need to complete this form if you are married or in a civil partnership and this is evidenced by:

* a standard registered British marriage or civil partnership certificate, i.e. as recognised by UK law, or
* a certificate of marriage or civil partnership that took place outside the UK which is an official registered document containing a serial number and official stamp/seal and which is recognised by UK law (e.g. married in France) – note that you must supply a formal translation at your own expense.

You **do** need to complete it in respect of:

* all co-habiting couples, and
* if you are married or in a civil partnership but this is not evidenced as detailed above.

***What documentary proof of residence is acceptable?***

An official independent document linking you and your partner to the declared address and issued/dated within the last six months or the current charging period (if annual), such as:

|  |  |  |
| --- | --- | --- |
| * House insurance policy * Car insurance policy * Life assurance statement * Investment or pension statement * Current TV Licence * Current UK Full driving licence * Cohabitation agreement * Copy of electoral roll * Council tax bill | * Disclosure and Barring Service (DBS Check) * UK Bank/Mortgage statement\* * UK Building society statement\* * Credit / debit card statement\* * Credit union statement\* * Utility bill\*, e.g. Gas, Electric, Water, Landline phone * HMRC statement | * Tax Document, e.g. Notice of coding or Tax assessment * Council tenancy agreement * Housing Association tenancy agreement * Notification of Benefits from a Government Agency, e.g. DWP, JobCentre Plus, Local Authority * Vehicle Log Book (V5C) |

\* Each proof of residence must be from different companies/suppliers. Multiple bills for one person from the same company/supplier do not count as separate proofs of address.

A document that shows both names (e.g. a joint tenancy agreement) may be used as proof for both the employee and the partner. There must still be 3 separate proofs of address in total for each person.

***What kind of documents are not acceptable? Examples only (not a complete list):***

|  |  |  |
| --- | --- | --- |
| * Passport * Payslips * Junk mail | * Private tenancy agreement * Medical appointment letter/card * Mobile phone statement * Broadband supply statement | * Store card account statement * Membership statement e.g. library, gym * Court summons * Anything without an address on it |

**Swearing the Oath: *Who can witness this form?***

The Statutory Declaration must be made in front of and counter-signed by one of the following:

* A solicitor authorised to act as a Commissioner for Oaths and regulated by the Law Society (also requires Firm Stamp or Letterhead)
* A Notary Public (listed by the Faculty Office of the Archbishop of Canterbury – see [www.facultyoffice.org.uk/notaries/find-a-notary](http://www.facultyoffice.org.uk/notaries/find-a-notary) ) (also requires the notary seal)
* A Magistrate or Justice of the Peace (also requires Court Stamp)
* A Commissioner for Oaths (also requires Firm Stamp or Letterhead)

**Police Officers, religious leaders, medical professionals etc are not authorised to witness a Statutory Declaration.**

Any fees incurred in the creation of this Declaration must be borne by the Employee. This may include translation fees to satisfy the counter-signatory.