

Restricted once complete

## Special Payment (SP) capture and referral

Customer's name:

NINO:

Address:

SP payee (if different from above):

Benefit: Choose an item.

Address:

SP Ref no.

Directorate Choose an item.

### Account details

Sort code:

Bank / Building Society name:

Feedback Handler

Account Holder:

Ref:

Account number:

Trend type: Choose an item.

The SP request is for:

**Select appropriate box**

Gross Inconvenience (GI)	<input type="checkbox"/>	Gross Embarrassment (GE)	<input type="checkbox"/>	Severe Distress (SD)	<input type="checkbox"/>
Bank Charges (BC)	<input type="checkbox"/>	Post/Phone Charges (PC)	<input type="checkbox"/>	Travel Costs (TC)	<input type="checkbox"/>

Categories Awarded	Choose an item.
Categories disallowed	Choose an item.
Total SP Awarded	£
SOP Account Code(Cons)	Choose an item.
SOP Account Code(AFL)	Choose an item.

Decision Maker's (CRM) Name	
Grade	Choose an item.
Full Contact Telephone Number	
Office Name	
Cost Centre Number	
District / Centre	
Group / OSN	
Date of Decision	
SOP1 Completed (Yes/ No)	Choose an item.

Authorising Manager Name	
Grade (not below HEO)	Choose an item.
Contact Telephone Number	
Office Name	
Date	
Customer letter prepared (telephoned) and	

Retain hard copy for 3 Years from date decision

SOP1 retain for 6 years

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sent on:	
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I confirm that this decision has been made in accordance with the Special Payment Guidance.

Authorising Manager signature	
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Local SPEC 1 sent to the CRT on	
Reason for escalation	Choose an item.
Escalated to SPU on	

A full sequence of events to be detailed below to fully justify and support the SP decision, both positive and negative. Details of any to be passed to the Budget holder.

**Summary and decision**

*From the information gathered provide a description of what happened, what should have happened, has maladministration occurred, the effects of the maladministration on the customers' life and details of the redress considered appropriate.*

*Where has the maladministration occurred?*

<b>What happened</b>
<b>What should have happened?</b>
<b>Effect</b>
<b>Redress</b>
<b>Notes</b>

Special Payment  
Local/CRT Decision

SPEC 1(Local/CRT)

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SOP1 retain for 6 years