

# Annual Zone Card Loan Application Form



# Applicable For The Year 2024

Please return completed form to:- ggc.travelpo@nhs.scot or Travel Plan Office, Central Medical Block, Queen Elizabeth University
Hospitals Campus, Govan Road, Glasgow, G51 4TF

| Part One: Applica  | ant Detail    | s (Please Print)                               |               |  |   |             |                 |  |
|--|---------------|--|---------------|--|---|-------------|-----------------|--|
| Full Name:   |               |  |               | Home Address:                          |   |             |                 |  |
| Job Title:   |               |  |               |  |   |             |                 |  |
| Ward/Department:   |               |  |               | Post Code                              | : | Home/Mobile | Home/Mobile No: |  |
| Directorate:   |               |  |               | Email:                                 |   |             |                 |  |
| Hospital:  |               |  |               | Zonecard Start Date;                   |   |             |                 |  |
| Work Telephone:  |               |  |               | ZoneCard smartcard no. (if applicable) |   |             |                 |  |
| Part Two: Journe   | v Details     |  |               |  |   |             |                 |  |
| From:  |               |  | То:           |  |   |             |                 |  |
| Zones Required (Pleas  | se refer to Z | oneCard map                                    |               |  |   |             |                 |  |
|  |               |  |               |  |   |             |                 |  |
|  |               |  |               |  |   |             |                 |  |
| Total number of zone   | s Required    |  |               |  |   |             | ſ               |  |
|  |               | This Application is for a 2 & 4 Zone Card Only |               |  |   |             |                 |  |
|  |               | £2730.00 to be repaid as per below             |               |  |   |             |                 |  |
| I undertake to repay t   | he sum owe    | ed as follows: (tick App                       | ropriate box) |  |   |             | '               |  |
| I am Monthly Paid  |               | 12 deductions of £227.50                       |               |  |   |             |                 |  |
|  |               | <b>—</b>                                       |               |  |   |             |                 |  |
| I Am Weekly Paid   |               | 52 deductions of £52.50                        |               |  |   |             |                 |  |
| Part 3: Pay Detai  | ls            |  |               |  |   |             |                 |  |
| Staff Pay Number Pay Div Group Code Pay Point  |               |  |               |  |   |             |                 |  |
| G/C  |               |  |               |  |   |             |                 |  |
| Date Commenced in NHS Greater Glasgow & Clyde  |               |  |               |  |   |             |                 |  |
| Part 4: Authorisation - I agree to the following conditions  |               |  |               |  |   |             |                 |  |
| I agree to pay the sum as indicated above.   |               |  |               |  |   |             |                 |  |
| 2. If I leave the employment of NHSGGC or my employment is terminated before repayment has been made in full or if I otherwise   |               |  |               |  |   |             |                 |  |
| breach the conditions of this loan agreement, I authorise Payroll to deduct the remaining outstanding balance from my final salary.  3. I have read fully and understand the attached Terms and Conditions |               |  |               |  |   |             |                 |  |
| Signature of App   | licant        |  | ×             |  |   |             |                 |  |
| anginatare of App  | Medille       |  |               |  |   |             |                 |  |
|  |               |  |               | _                                      |   | -           |                 |  |

# ANNUAL ZONE CARD SCHEME - TERMS AND CONDITIONS



As part of the ongoing implementation and development of the Travel Plan for NHS Greater Glasgow and Clyde (NHSGGC), the organisation is providing staff currently employed with NHS GGC with the opportunity to purchase an annual ZoneCard which they can pay for in manageable monthly/weekly instalments.

The following Terms and Conditions apply:

#### Who can apply for a loan?

An interest free annual ZoneCard loan will only be issued to NHSGGC employees who meet the following criteria:

- You must be a salaried member of NHSGGC staff with a Payroll number, i.e. have a contract of employment issued from Human Resources;
- You must have a contract of employment that covers the full period of the annual ZoneCard

## The application process

- Annual ZoneCard application forms are available from NHSGC website, cash offices at each Board site, and directly from Travel Plan Office.
- The completed application must be returned to the Travel Plan Office at ggc.travelpo@nhs.scot or to the address on page 1
- You will require a smartcard for your ticket. An existing ScotRail or SPT Subway smartcard can be used, or a ZoneCard smartcard can be purchased from SPT.
- The Travel Plan Office will then confirm your application with SPT, who will add your ticket remotely. You will able to load your ticket to your smartcard using the ZoneCard app or at a bus ticket machine or rail / Subway gate when first travelling.
- Loan repayments will only commence following the date of issue of the annual ZoneCard.
- In the event that the value of the loan exceeds or is less than the value of the ZoneCard issued and invoiced by SPT, you will be required to complete a new application. You will be advised of any discrepancy before ticket is processed.
- SPT will invoice NHSGG&C directly;
- Please allow up to 14 days for your application to be processed.

# Repaying the loan

Repayment of the NHSGGC annual ZoneCard loan made to you will be by direct deduction in 12 monthly installments from your salary or 52 weekly instalments if the you are paid weekly. If the deductions do not commence within 1 month / 4 weeks, then it is your responsibility to contact your Payroll Officer. When your mandate reaches Payroll and there is a balance due, Payroll will deduct the outstanding balance from your next weekly / monthly salary to compensate.

### **Procedure if member of staff leaves NHSGGC**

If you leave NHSGGC before the loan has been repaid the outstanding balance of the loan will immediately become repayable and will be recovered from your final salary. If however the outstanding balance is more than your final salary then you must repay the total outstanding balance before your last working day.

#### **ANNUAL ZONE CARD SCHEME - TERMS AND CONDITIONS**

#### Procedure if member of staff undergoes change of circumstances

If you experience a change in personal circumstances, such that you are no longer able to use the annual ZoneCard, or no longer wish to use it, at any time before the whole loan has been repaid, you may return, the annual ZoneCard to SPT, by registered post. Once the annual ZoneCard has been returned the balance of the loan will immediately become repayable and will be recovered from your next pay. If the balance of the outstanding loan is larger than your next net salary payment, individual arrangements will be made with you for recovering the balance. NHSGGC will request a refund of the outstanding balance of the annual ZoneCard from SPT. Refunds are only available on unused complete weeks. SPT charge an administration fee of £10.00 for this service. When NHSGGC receive the refund from SPT it will be repaid via Payroll.

#### Lost or Stolen ZoneCard

If your smartcard is lost or stolen you should inform the card issuer and SPT at zonecard@spt.co.uk. The lost/stolen card can be remotely blocked and the remaining validity of your ticket loaded onto another smartcard. If you need to replace a lost/stolen ZoneCard smartcard a charge may apply. You will be responsible for your own travel costs while your enquiry is being processed.

#### Renewing an annual ZoneCard

An interest free loan for the annual ZoneCard is not renewed automatically. You must submit a new loan application form to the Travel Planning Office at least three weeks before the card expires to ensure the card is renewed in time.

### **Conditions of and Liability for Travel**

You understand and agree that the conditions of, and all liability for, travel through the use of the annual ZoneCard (and in particular damage to property, injury, death, and every kind of financial loss resulting from such travel) are all exclusively as between you and SPT and/or any relevant transport operators and are not in any way the responsibility or liabilities of NH GGC or any other NHS entity.

All employee information will be held in accordance with the General Data Protection Regulation (2018). Information will be shared between operator and NHS Greater Glasgow & Clyde for statistical analysis and monitoring.

#### **Declaration:**

I have read and accept the above Annual ZoneCard Loan Terms and Conditions set out on this and the one preceding page.

| Name (Please Print) |      |
|---------------------|------|
| Date                | Sign |

June 2024