Application for reimbursement of charges imposed on returning residents at the Comis Hotel between 15 April and 13 May 2020

Part 1 - About you

Please complete all details.

Mr / Mrs / Miss/ Ms Dr / Other	/ First nar	me		Surname		
Dr / Other						
Address						
Postcode						
Email address						
Telephone number						
Copy of identification	enclosed (tick	one)				
Passport	Driving	licence	Other			
Part 2 - About your ti	ravel and Comi	s Hotel sta	av			
Date of travel to the [between 15 April to			ayed at Comis		lumber f nights	Please tick one
		Dates sta		o		
[between 15 April to inclusive]		Dates sta	ayed at Comis	0 1	f nights	
[between 15 April to inclusive] 15 April 2020		Dates sta 15 April - 22 April -	ayed at Comis – 29 April 2020	0 1	f nights	
[between 15 April to inclusive] 15 April 2020 22 April 2020		Dates sta 15 April - 22 April - 29 April - 6 May -	- 29 April 2020	0 1 0 1 0 1 7	f nights 4 4	
[between 15 April to inclusive] 15 April 2020 22 April 2020 29 April 2020 6 May 2020	o 6 May 2020	Dates sta 15 April - 22 April - 29 April - 6 May – *see guid	- 29 April 2020 - 6 May 2020 - 13 May 2020 20 May 2020 dance note - P	0 1 1 1 7 art 2	f nights 4 4	
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Part 3 - About your payment

Please tell	us how v	vou made	the o	original	payment(s)
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One-off payment ir	ı full					
Part payment						
Loan agreement (in	stalments)				
Part 4 - Payment de	tails for re	fund				
Account name						
Name of bank						
Account number						
Sort code						
If I do not provide baprovided in Part 1.	ank details	, I understand that a	a cheque will l	be issued t	to the name and	d address
Part 5 – Declaration						
I confirm that the inf	formation	submitted in this fo	rm is true and	correct.		
I agree to the sharing arranging a refund.	g of this in	formation with Trea	isury for the p	ourposes o	f assessing eligi	bility and
I agree to the use of to be used in suppor	•					this form
This expenditure has	not been	previously recovere	ed in full or pa	rt by an in	surance claim.	
Signature			Date			
Return this form to r We may need to con please tell us if you v	tact you a	bout your response	s on this form	, or the re	imbursement o	f charges –
Phone	Em	ail 🔲				
Internal use only						
Date Received		Received by		Reference	ce No issued	

Guidance notes

General notes

Refunds are solely for charges paid to the Comis Hotel for full board (accommodation and catering) as set out in Recommendation 14 of the Covid Review, and do not include any other costs.

Privacy notices are available at www.gov.im/treasuryprivacynotice and www.gov.im/doi-privacy

Financial Information submitted will be kept on record for 7 years in line with our Financial Regulations.

Personal data related to COVID records will be kept until the Public Records Office have completed selection under section 3 of the Public Records Act 1999 in relation to records relating to the pandemic.

Please allow up to 4 weeks for processing your application. We will contact you if any information is missing from your application which will delay any payment.

Part 1

We must be able to verify your identity before we can make a payment.

Suitable forms of ID showing your full name and date of birth include a passport, photo card driving licence, a copy of your birth certificate, a recent utility bill, or student identity card.

Payments will be made only to residents who meet the criteria and eligibility.

Part 2

Eligible dates

To qualify you must have returned to the island and signed a Direction Notice directing you to stay at the Comis Hotel for 14 nights isolation during the period 15 April to 13 May 2020.

Payments are only available to residents who were repatriated to the Island by ferry during the period 15 April to 6 May 2020.

Comis Hotel isolation period

Group	Dates	Maximum number of nights
1	15 April – 29 April 2020	14 nights
2	22 April – 6 May 2020	14 nights
3	29 April – 13 May 2020	14 nights
4	6 May – 20 May 2020	7 nights
	*Regulations changed on 13 May	

Note

Group 4 - This group consists of those residents who had already completed 7 days at the Comis Hotel, who meet the criteria and eligibility for repayment. Individuals who have already been refunded for the second week of their stay (i.e. 13 May – 20 May 2020) will only receive a refund for the first week.

Other adults/children

Tell us the names of any others in your party that you paid for. Other adults in your party will not be able to submit a separate application for a refund.

There was a child rate for full board accommodation, but no charge was made for babies.

Part 3 - No notes

Part 4

Your bank details will be shared with the Treasury to enable Finance Shared Services to make the payment to you. They will be kept for six years, plus the current financial year in line with the Treasury's retention schedule.

Part 5

Please ensure you sign and date the form. No payments will be approved in the absence of the signed declaration.

Payments will not be made if this expenditure has been previously covered by an insurance claim.