Appendix C

A blue and white logo

Description automatically generatedPerth & Kinross Council

**REMOVAL & RELOCATION SCHEME**

**Employee** **Agreement Form**

I, (full name)

Address:

Job Title: Service:

authorise recovery of any overpayment made under the Removal & Relocation Scheme should I leave the employment of Perth & Kinross Council within three years of the date of appointment to my post.

|  |  |
| --- | --- |
| **Repayment Criteria:** | |
| Employee fails to relocate within a year | 100% of total claimed |
| Employee leaves within 1 year | 100% of total claimed |
| Employee leaves within 2 years | 50% of total claimed |
| Employee leaves within 3 years | 25% of total claimed |
| Employee leaves after 3 years | No repayment due |

I hereby agree for any overpayment to be deducted from my final salary payment.  Should there be insufficient monies to allow recovery, I will arrange to pay the balance by credit transfer to Perth & Kinross Council's bank account within the timescale set by the Payroll and Reward Team.

Signature: Date:

On completion, send to [Payrollandreward@pkc.gov.uk](mailto:Payrollandreward@pkc.gov.uk).