

Salary Packaging Application Form

Employer Set Up

To Submit this Form:

1. Fill in all details
2. Print the form
3. Send your completed and signed form to: SalaryPackagingAdmin@fleetpartners.com.au or your Relationship Executive or Business Development Manager

1 Employment Information

Employer Name:

ABN:

Address:
(Street no. / Street Name
Suburb / State / Postcode)

HR Contact: Phone:

Email:

Payroll Contact: Phone:

Email:

FBT Status:

Number of employees: Pay Frequency:

Next Payroll Dates:
(complete for next pay period)

Start of Pay Period: End of Pay Period:

Cut-off Date: Pay Date:

2 Salary Packaging Items (please select)

<p>Everyday Expenses <small>(only available to employer types with FBT exemption or rebate status)</small></p> <p>Meal Entertainment <small>(only available to employer types with FBT exemption or rebate status)</small></p> <p>Novated Leasing</p> <p>Additional Superannuation Contributions</p> <p>Laptops, notebooks, tablets, mobile phones</p> <p>Airport Lounge Membership</p> <p>Professional memberships & subscriptions</p>	<p>Self-education expenses</p> <p>Financial advice</p> <p>In house childcare</p> <p>Disability / Income protection insurance</p> <p>Relocation expenses</p> <p>Remote area housing</p> <p>Home office expenses</p>
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