

SUPERANNUATION SALARY SACRIFICE FORM

This form is to be used by workers wishing to commence, vary or cease a salary sacrifice arrangement to their superannuation.
It is recommended that appropriate independent financial advice is sought prior to completing this application form.

STEP 1: PROVIDE YOUR EMPLOYEE DETAILS

Surname:	Given Name(s):
Email:	Phone:

STEP 2: CONFIRM YOUR FUND DETAILS

Retail, Public Offer, Industry or Personal Superannuation Fund

Fund Name:	Member No.:
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ATO regulated Self-Managed Superannuation Fund

Fund ABN:	Fund ESA:
Fund BSB:	Fund Account No:

STEP 3: SET UP YOUR SALARY SACRIFICE

Amounts will be processed in addition to superannuation guarantee contributions (SGC). Please provide amount in excess of SGC.

New Request Vary Existing Request Cease Existing Request

Please start making salary sacrifice contributions to the above fund of:

\$.00 each Week Fortnight Month One-Time Contribution

From first salary payment after / /

Please process my super contributions monthly while I have an active salary sacrifice arrangement.

I understand that I will revert to quarterly super contributions if I elect to cease my salary sacrifice arrangement.

STEP 4: SIGN THE DECLARATION

I understand and acknowledge that:

- while my employer pays such contributions the salary otherwise payable to me will be reduced by the amount of the contributions.
- salary sacrifice can only apply to future remuneration or service.
- the contributions will be treated as employer contributions for tax purposes and a contributions tax of 15% on contributions will be payable when they are received by the fund.
- the benefit resulting from these contributions:
 - will not be treated as non-concessional contributions and may attract further taxes when paid as a benefit,
 - will be subject to Federal Government preservation requirements, and
 - will count towards my concessional contributions cap.
- the salary sacrifice arrangement will continue in force until I advise my employer in writing of any change or cancellation.
- it's my responsibility to obtain independent financial advice before agreeing to salary sacrifice.

Signature:

Date:



Head Office
Melbourne
Suite 2, Level 7, 10 Yarra Street
South Yarra, VIC 3141



Postal Address
Sunshine Coast
PO Box 1102
Maroochydore, QLD 4558



Support Contact
Email: supportaus@oncoreservices.com
Phone: 1300 654 484