

Self-Funded Fly in – Fly Out Travel (FIFO). Application Form

Personal Information:

First Name:	Middle Name:	Surname:
Mobile Number:	Date of Birth: / /	
Work Email:	Home Email:	
Normal Residential Address:		
Suburb:	State:	Postcode:

Employment Details:

Employer Name:	
Remote Site Location:	
Annual Salary: \$	Payroll Number:

Frequent Flyer Details:

Airline:	Frequent Flyer Number:
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Departure and Arrival Information:

YOU WILL BE REQUIRED TO PROVIDE PROOF OF YOUR HOME ADDRESS PRIOR TO PACKAGING COMMENCEMENT

Normal Home Airport:
Normal Arrival Airport:

Nominated bank account:

Bank:	Branch:
Account name:	
BSB number: [] [] [] - [] [] []	Account number: []

Benefit Deduction Amount

PLEASE NOTE THAT YOUR FIRST DEDUCTION WILL BE DOUBLE YOUR ONGOING DEDUCTIONS (+ \$100 New user fee)

First Deduction:	\$
Ongoing deductions:	\$

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Fly-In Fly-Out Airfares

For Self Funded Employees with a permanent residence outside of the remote location only.

- Eligibility to participate is determined by submission of proof of your normal residence being outside of the remote site location and adjacent remote area townships. i.e Current MVDL, utility account etc...
- Only flights that align with your normal roster are eligible under this salary packaging benefit.
- Only Self Funded airfares between your normal place of employment and normal place of residence can be paid.

Employee Declaration

I understand and accept the terms and conditions of my employers salary packaging program.

In addition, I understand and confirm that:

1. I am aware that there must be sufficient funds in my Paywise salary packaging account to cover the cost of booked flights and in the event that insufficient funds are available, I will be required to pay for those flights from my own funds **without the benefit of salary packaging.**
2. I confirm that I am currently employed under a FIFO contract with my employer and I understand that any changes to this employment status could impact my ability to claim self funded FIFO flights
3. I consent to Paywise providing my personal details to our nominated Travel Partner
4. I understand that, in the event a flight booked under salary packaging arrangements is cancelled, a credit will be issued and that credit may only be applied to a complying future flight.

Employee Name (print):

Employee Signature:

On acceptance of this application, Paywise Salary packaging Terms and Conditions will be issued.

Employer Declaration

For this benefit to be allowed, only an authorised representative of your employer can sign this Employer Declaration

It is acknowledged that this employee meets the condition required to salary package the Fly In Fly Out benefit

Employer Representative Name (print):

Employer Representative Signature:

Position:

Date: / /

DISCLAIMER: Paywise provides administration and referral services on behalf of employers. It does not provide any form of financial, taxation or financial product advice to employees on the relative merits of package programs or on any other basis. Some information on taxation matters may be provided to illustrate possible advantages, but is of a general nature only. You should seek your own independent professional advice on how packaging programs may impact your particular financial, taxation and welfare benefit circumstances.

Tax laws regarding the treatment of salary benefits may change, which could adversely impact your financial, taxation or welfare benefit decisions.

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