

# **INDUCTION CHECKLIST**

DETAILS		
Employee:	Induction conducted by:	
Position/Department:	Commencement Date:	

	Task	Actioned	Date
PRE-EMPL	ΟΥΜΕΝΤ		
Forms	Application for Employment		
	Pre-employment Medical completed <i>if applicable</i>		
Mailed	Letter of Offer / Employment Contract / Employee Handbook signed and returned		
	Position Description signed and returned		
	Fair Work Information Statement		
WELCOME	& INTRODUCTION		
Discuss & Issue	The following SignSite policies & documents to be signed off and returned:UWelcome to SignSiteOHSEEOSignSite Site RulesDrug & Alcohol		
Forms	Payroll Documentation – completed         □       Electronic Payment of Wages       □       Super Choice Fund         □       Tax File Number Declaration       □       Personnel Information Sheet		
Form	Complete Property Issue Form - <i>if applicable</i>		
Discuss	Pay structure and payment method		
Discuss	Leave entitlements (AL, SL, LSL, Public Holidays)		
Discuss	Introduction to required paperwork, timesheets, leave forms, claim forms		
Issue	SignVox login and SignSite email address		
Discuss	Starting time, meal breaks, and finishing time		
Discuss	Safety hazards in relative working area and OHS & Hazard Reporting		
Discuss	Safety Equipment & PPE needs on shop floor and in specific work areas		
Discuss	First Aid Officer / location of First Aid Station / Reporting Procedure		
Сору	Photo copy relevant certificates - if applicable:         Driver's Licence       OHS Construction card       EWP         Forklift       Traffic Control       Other		
Form / Copy	Motor Vehicle Driving Declaration & obtain copy licence - <i>if applicable</i>		
Order/ Supply	Issue relevant PPE and equipment  Employee  Sales  Office  Other		

	Task	Actioned	Date
ORIENTAT	ION		
Walk	Advise and introduce location of employee's relative work area, showers, toilets, car parking area, lunch rooms		
Walk	Show location of different work areas / offices if <i>applicable</i>		
Walk	Introduction to Managing Director, Managers, Production and Office staff		
Walk	Introduction to fellow employees		
Walk	Assign Locker and issue key if <i>applicable</i>		
TRAINING			
Discuss	Conduct induction into the operation of job required equipment / machinery		
Discuss	Train in directly associated procedures and forms pertaining to their role		
Discuss	Quality Assurance Policy Manual and associated procedures and forms		
Discuss/ Issue	Relevant SWMS <i>if applicable</i>		
Computer	View Safety & Manual Handling & Drug & Alcohol in the workplace DVD's		
Discuss	OHS Policy Manual and associated procedures and forms		

SIGN OFF	
Employee:	Date:
Manager/Supervisor:	Date:

• Please sign off when each task is completed by Supervisor/ Manager and employee.

• *Return this form to National Administration.* 



Revised: 01-Aug-17

# PERSONAL DETAIL FORM

Private & Confidential

New Employee (please indicate)

Existing Employee (please indicate)

Given Name(s):	Surname:
Home Address:	
Email Address:	
Home Ph. No.	Mobile No.
Date of Birth:	
Tax File No.	
Licence - State & Number	
Next of Kin Name:	
NOK Relationship:	
NOK Contact No.	

Bank Account Name	Bank BSB #	Account #	Bank
	-		

Superannuation Fund D	Details		
Nominated Super Fund		Signature	
Member Number		Date	



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# **Mobile Phone Policy**

The aim of this policy is to provide employees with guidelines regarding the appropriate use of their company supplied mobile phone

# <u>Use</u>

All mobile phones have been set up to allow free calls between company mobiles, this being the case SignSite mobile to SignSite mobile calls are free and employees are encouraged to use mobiles when calling other staff members rather than land lines.

# Private Use

Your mobile phone has been issued to you for work purposes. Therefore, private use of your mobile phone should be kept to a minimum

If it is found that an employee is using his or her mobile irresponsibly, then the employee may have the phone removed or be required to reimburse SignSite for excessive personal calls. Your phone use will be more closely monitored until a reasonable proportion of business verses private use is achieved.

# **Applications**

SignSite mobile phones can download applications. SignSite acknowledges that some applications can be used for work purposes and the download and cost associated can be accepted.

However, prior to downloading any applications onto your SignSite mobile phone; approval from Senior Management is required.

# Lost or Broken Phones

SignSite expects all employees who have been allocated mobile phones to take the utmost care and responsibility for them. If a phone is lost, it should be reported to the National Administration Manager as soon as it is noticed missing. In circumstances where it has been shown that the employee's carelessness contributed to the loss or damage of the phone then the employee will be required to pay the replacement cost. If the phone is faulty or broken you must notify the National Administration Manager Manager as soon as possible.

# Termination of Employment

On termination of employment the employee must return company issued mobile phone, including any battery charges or other accessories supplied by the company for use with the phone.



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# Message Bank

Message bank is installed on all mobile phones and must be used and accessed accordingly. All users are expected to answer all voice mail within 2 hours of phone activation as a matter of courtesy.

# Holiday Leave Usage

Mobile phones must be returned to your relevant manager for absences exceeding 2 working days or more.

# Terms of Reference

I acknowledge that the mobile phone and telephone number remain the property of SignSite and that I am entitled to use the number whilst employed by the company

I will, at all times use the hands-free kit while driving. SignSite accepts no liability for any loss that may occur in the event of me using my phone whilst driving.

I agree to disclose any password or lock function codes if requested at any time by Senior Management of the company including upon termination.

International calls or SMS are not permitted

Confidential or private information cannot be stored on this phone

The camera on the phone is to be used for the express purpose of taking photographs that are relevant to your role and or the company.

Photos are not to be sent by SMS. All photos are to be uploaded to Google Drive.

# Employee Acknowledgement

By signing this mobile phone policy, I acknowledge that SignSite reserves the right to take away my mobile phone should I be found to have breached any of the above. I also acknowledge that any serious breach of this policy may have impacts on my ability to remain employed by SignSite.

Employee	National Administration Manager
Name:	Name:
Signature:	Signature:
Date:	Date:



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# **Travel Policy**

As an employee of SignSite you may occasionally be required to travel on company business. This policy will outline the proper procedures regarding these areas.

# Policy and Procedures

Company travel must relate to necessary business away from the employee's normal workplace. SignSite will reimburse its employees for reasonable travel expenses incurred on authorised company business. All travel expenses must be properly documented for approval and reimbursement. Any exception to the policy must be submitted to the National Administration Manager.

# Transportation

Wherever possible tickets should be booked at least seven days in advance to benefit from any discount offered. All tickets to be purchased by the National Administration Manager.

# Accommodation

All accommodation will be booked by the National Administration Manager and will include breakfast (where possible).

# <u>Meals</u>

While away on company business, all employees are entitled to the following meal allowances:

- Breakfast \$15 (if not included with accommodation)
- Lunch \$15
- Dinner \$40

These allowances do not cover alcohol and alcohol purchased must be paid for by the employee. Any claim for entertaining of customers or clients must be approved by the Managing Director.



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# **Documentation**

All expenses must be shown on SignSite's expense form and accompanied by receipts. Installers required to be away overnight will be provided a cash advance but receipts must be provided and attached to a SignSite expense form. SignSite will ONLY cover the cost of receipted expenses.

Employee	National Administration Manager	
Name:	Name:	
Signature:	Signature:	
Date:	Date:	



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# **Vehicle Procedures and Agreement**

Driver Details	Vehicle Details	
Name:	Registration Number:	
Licence Number:	Model/Colour:	
Automatic Manual	VIN #:	

I have no current restrictions, suspensions or cancellations against my licence\*\*

I have current restrictions on my licence\*\*

Please explain:

\*\*Failure to disclose any restrictions against your licence to SignSite when in charge of a company vehicle is not permitted. You will be held liable for any charges including repairs to company and/or third-party vehicle.

# Terms and Conditions

SignSite will take no responsibility for fines, or accidents if it is found to have been through staff negligence. Any fines or excess will be charged to the staff member responsible. If a fine against a company vehicle is lodged the driver will be responsible for payment of that fine. Any incident that may occur that involves the vehicle must be documented, with written reports and photographs.

It is unprofessional for the vehicles to be untidy and/or dirty at ANY time. ALL food products/waste must be removed from the vehicle. The company vehicles are to be maintained in a professional manner at all times.

Company vehicles must be detailed at least once a fortnight through the efforts of the staff assigned to that vehicle. If a vehicle is due for service the time must be taken to have it done. If tyres etc are wearing it may not be immediately noticeable for the Administration Manager. You are expected to check the vehicle regularly when it is in your control and advise administration that there are items that



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need attention. As the driver of the company vehicle you are responsible to make sure it is safe and road worthy whilst you are in control of the vehicle.

Vehicles will not be used irresponsibly or for personal use. Company vehicles are to be used for the benefit of the company only. You are the only authorized employee/persons to operate the assigned vehicle.

Note, there is no Company Insurance cover for any third party. No third party is allowed to drive the vehicle at any time. If the vehicle is in an accident whilst a third party is operating the vehicle, you are personally responsible for all costs involved. If it is found that the company vehicle has been misused, the assigned staff member must explain the reasons why, and possible penalties will apply. If requested, the staff member must be able to account for the vehicles whereabouts at all times.

I \_\_\_\_\_\_ acknowledge that I have been made responsible for a Company vehicle. I have read and understand the Terms and Conditions, and understand the consequences of failure to take due care whilst I am in charge of a company vehicle.

Employee	National Administration Manager	
Name:	Name:	
Signature:	Signature:	
Date:	Date:	



# **Driver Questionnaire - For Insurance Purposes**

To comply with your Duty of Disclosure, we recommend that you have all new employees and all current employees who regularly drive company vehicles complete this questionnaire and submit same to us for disclosure to the insurer.

### "Your Duty of Disclosure"

What you must tell the insurer? Before you enter into this policy you have a duty, under the Insurance Contracts Act 1984, to disclose every matter that you know, or could reasonably be expected to know, is relevant to the insurers decision whether to accept the risk of the insurance and, if so, on what terms. You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate this policy. Your duty however, does not require disclosure of a matter: that diminishes the risk undertaken by the insurer; that is of common knowledge; that the insurer knows or, in the ordinary course of their business, ought to know; as to which compliance with your duty is waived by the insurer. If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce their liability under your policy in respect of a claim or they may cancel the policy or do both. If your non-disclosure is fraudulent, they may also have the option of avoiding the policy from the beginning.

### "Penalty Excess"

Please note insurers are now applying an additional excess for non-nominated young /inexperienced drivers. In order to avoid higher excess, please nominate all drivers expected to drive the vehicles.

### "Restricted Drivers / Declared Drivers"

Please note certain vehicles covered under the policy may have cover restricted to nominated or declared drivers only (refer to your schedule for details). In order to avoid cover exclusions or higher excess, please nominate all drivers expected to drive the vehicles and have all drivers complete and submit a completed drivers declaration.

### **Insured Name**

Fu	III Name		
Ve	ehicle Insured		
Ye	earMake	Model	Reg No
Dr	river Details		
Fu	III Name	Date of birth	Age
Lic	cense Number	Туре	Expiry Date
	riving History / Claims History ave you or any regular driver (any pe	ersons who drive an insured vehicle more th	an 12 times a year) had;
1.	insurance declined, cancelled, or a	any special conditions imposed	Yes / No
2.	any insurance claim refused or de-	clined	Yes / No
3.	any claims on any motor vehicle in	surance policies	Yes / No
3.	any traffic offences, been charged (excluding parking) in the last 5 ye	, summoned or received infringement notice ars?	es of any kind Yes / No
4.	a license disqualified, cancelled, s	uspended in the last 5 years?	Yes / No
5.	had any accidents, fires or thefts in	nvolving vehicles within the past 5 years?	Yes / No
6.	been charged or summoned for ar malicious damage, theft or injury to	son, drugs, fraud dishonesty of any kind, o anyone within the past 5 years?	Yes / No
7.	ever been bankrupt or had a recei	ver manager or administrator appointed?	Yes / No
De	etails must be provided for any ques	tion answered yes above;	
····			
		erstood the duty of disclosure, and the answ	
Na	ame:	Signed:	Date:

DRIVERS DEC 20090213



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# Zero-Tolerance Drug-Free and Crime-Free Policy

In consideration of the execution employment, I agree to uphold SignSite's Zero-Tolerance Drug-Free and Crime-Free policy as follows:

- Any employee or a guest or other person under the employee's control shall not engage in criminal activity, including drug-related criminal activity, on or near the said premises. "Drug-related criminal activity" means the illegal manufacture, sale, distribution, use, or possession with intent to manufacture, sell, distribute, or use of a controlled substance (Controlled Substance Act 1984)
- At the discretion of Senior Management, SignSite reserves the right to random drug tests at any time.
- Any employee or a guest or other person under the employee's control shall not engage in any act intended to facilitate criminal activity, including drug-related criminal activity, on or near the said premises.
- Employees will not permit the company to be used for, or to facilitate criminal activity, including drug-related criminal activity, regardless of whether the individual engaging in such activity is an employee or a guest.
- Employees will not engage in the manufacture, sale, or distribution of illegal drugs at any locations, whether on or near the company premises or otherwise.
- Employee or a guest or other person under employee's control shall not engage in acts of violence or threats of violence, including but not limited to the unlawful discharge of firearms, on or near the company premises.
- VIOLATION OF THE ABOVE PROVISIONS SHALL BE A MATERIAL VIOLATION OF THE EMPLOYMENT AGREEMENT AND GOOD CAUSE FOR TERMINATION OF EMPLOYMENT.
   A single violation of any of the provisions of this added addendum shall be deemed a serious violation and material noncompliance with the employment agreement. It is understood and agreed that a single violation shall be good cause for termination of employment. Unless otherwise provided by law, proof of violation shall not require criminal conviction, but shall be by a preponderance of the evidence.



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- Prostitution, chemical activity, gang activity, and or any other breach of policy which jeopardizes the safety, health and welfare of the employees or customers, shall be a material breach of the employment agreement.

Employee	National Administration Manager	
Name:	Name:	
Signature:	Signature:	
Date:	Date:	



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# Smoking Policy

Management of SignSite have an obligation or 'Duty of Care' to ensure the wellbeing of all staff and customers whilst on our premises.

Please see the Company Policies regarding smoking:

- Smoking in any company vehicle is not permitted at any time under any circumstances.
- Smoking inside company premises is not permitted at any time.
- Smoking is not permitted within 4 metres of the public entrance to our or any other business this is reinforced under State Legislation.
- The company is willing to work with those staff who smoke to determine a designated outdoor smoking area.
- Staff who smoke are responsible for the safe disposal of all cigarette ends and for ensuring they are completely extinguished before disposal.
- Cigarette ends are not to be disposed of into the rubbish skip due to the type of products we dispose of which can be very flammable.
- Staff are also expected to refrain from smoking while out on site and with our customers.
- Smoking is to take place during staff breaks only. One in the morning break, one in the afternoon and at lunch. Any person found to be smoking out of these designated times may be issued with a written warning at the discretion of their supervisor.
- Only one person is permitted to have a cigarette break at any one time

Violation of the above Smoking Policy may result in disciplinary action at the discretion of SignSite management.

Employee	National Administration Manager	
Name:	Name:	
Signature:	Signature:	
Date:	Date:	

# Superannuation (super) standard choice form

# WHEN TO USE THE FORM

## **Employers**

Use this form to offer eligible employees their choice of super fund. You must fill in the details of your nominated super fund, also known as your default fund, before giving the form to employees.

Give this form to an employee when:

- you hire a new employee who is eligible to choose a super fund
- an existing eligible employee asks you for it
- you can no longer contribute to an employee's nominated super fund or it is no longer a complying fund
- you change your employer-nominated super fund and need to advise employees affected by this change.

# **Employees**

Use this form to advise an employer of your choice of super fund,

You must provide the required information so your employer can make contributions to your nominated super fund.

# ABOUT THE FORM

The Standard choice form has three sections:

- section A, which the employee completes by providing details of their choice of super fund, together with supporting documents.
- section B, which the employer completes by providing details of their nominated super fund (before they give the form to an employee).
- section C, which the employer completes to document the choice process for an employee.

Employers must retain the returned form as their record of the choice process. Completed forms must be retained for five years.

Superannuation reform changes – SuperStream

SuperStream is a new standard for the way employers pay contributions and send information to super funds. This form collects information that employers will need when using SuperStream.



# SECTION A: EMPLOYEE TO COMPLETE

If you choose your own super fund you will need to obtain current information from your fund to complete items 3 or 4.

# Item 3

### Nominating your APRA fund or RSA

Complete this item if you are nominating your own APRA fund (fund regulated by the Australian Prudential Regulation Authority) or a retirement savings account (RSA).

You must include the unique superannuation identifier (USI) provided by your fund.

You must attach a letter from the fund trustee or RSA provider confirming that the fund or RSA:

is a complying fund or RSA, and

will accept payments from your employer.

This letter may contain other information to help your employer make super contributions using the SuperStream standard.

### Item 4

### Nominating your self-managed super fund (SMSF)

Complete this item if you are nominating a self-managed super fund (SMSF).

You must include your SMSF's ABN, bank account details and electronic service address (ESA) (so the fund can receive electronic messages and payments from your employer using SuperStream).

# > FIND OUT MORE

ato.gov.au/SMSFSuperStream – for information about how SuperStream applies to SMSFs

If you are using an SMSF message service provider they will provide you with an electronic service address alias to include as the ESA on the form.

You must attach copies of the following documents to support your SMSF choice:

- a document confirming that the fund is regulated this can be printed from superfundlookup.gov.au
- a letter from the trustee of the SMSF confirming that the fund will accept payments from your employer – if you are the trustee, or a director of the corporate trustee, you can confirm acceptance by placing an 'X' in the relevant box on the form.

# Things you should know

- Your employer is not liable for the performance of the super fund you or they nominate
- You should not seek financial advice from your employer unless they are licensed to provide it
- Your employer is only required to accept one choice of fund from you in a 12-month period; however, they may accept more
- Your employer has two months after you return this form to them to action your request
- Any money you have in existing funds will remain there unless you arrange to transfer it (roll it over) to another fund – check the impact of any exit fees you will incur or benefits you may lose before leaving the fund (your employer cannot do this for you)
- If you quote your TFN to your employer for super purposes, they must provide it to the super fund

### You may have lost super

- It is important to keep track of your super if you've ever changed your name, address or job, you may have lost track of some of your super
- Having several super accounts could mean that fees and charges are reducing your overall super investment
- You can register for our online services and use SuperSeeker to check all your super accounts, find any lost or ATO-held super and transfer your super into one account using a simple online form

# > FIND OUT MORE

- ato.gov.au/superseeker
- ato.gov.au/super for information about super or choosing a super fund
- moneysmart.gov.au (on the Australian Securities & Investment Commission [ASIC] website) – search for 'choose super fund' for tips on how to choose a fund

# **SECTIONS B & C: EMPLOYER TO COMPLETE**

If an employee nominates their own super fund, they will provide information at section A that will assist you to prepare for, and make contributions to super funds using SuperStream.

# FIND OUT MORE

ato.gov.au/simplifyingSuperStream – for more information on SuperStream.

## Section B

Complete section B before giving this form to your employee. The super fund you nominate must be authorised to offer a MySuper product. If you need to confirm your MySuper arrangements contact your default super fund.

Sign and date this section on the day you give the form to your employee.

### Section C

Complete section C after your employee returns this form to you. Record the date you accept your employee's choice of fund and the date that you act on the choice. Retain the form with your records. Do not send the form to the ATO or to super funds.

# FIND OUT MORE

- ato.gov.au/employersuper for more information on super, offering an employee a choice of fund or paying super contributions
- apra.gov.au/RSE to find a super fund authorised to offer a MySuper product

# Things you should know

- The quarterly\* due dates for super contributions are:
   28 October
  - 28 Januarv
  - 28 April
  - 28 Julv
- If you have not received an employee's completed form and a super contribution is due, you must make the payment to your nominated fund by the due date
- In the two months after you receive an employee's completed form, you can pay their super contributions to either the fund you have nominated or the fund they have nominated
- After the two-month period, you must make contribution payments to the fund the employee has nominated
- You do not have to action an employee's fund nomination if they have nominated a fund in the previous 12 months; however, you may choose to action their request

# FIND OUT MORE

- phone 13 10 20 between 8am and 6pm, Monday to Friday, to speak to a tax officer
- phone our publications ordering service on 1300 720 092 for copies of our publications
- write to us at
  - Australian Tax Office PO Box 3578 Albury NSW 2640

## HELP

- If you do not speak English well and want to talk to a tax officer, phone the Translating and Interpreting Service on 13 14 50 for help with your call.
- If you have a hearing or speech impairment and have access to appropriate TTY or modem equipment, phone 13 36 77. If you do not have access to TTY or modem equipment, phone the Speech to Speech Relay Service on 1300 555 727.

You can pay contributions more regularly than quarterly. For example, some employers pay fortnightly or monthly based on employee workplace agreements or arrangements with super funds.

### **OUR COMMITMENT TO YOU**

We are committed to providing you with accurate, consistent and clear information to help you understand your rights and entitlements and meet your obligations.

If you follow our information in this publication and it turns out to be incorrect, or it is misleading and you make a mistake as a result, we must still apply the law correctly. If that means you owe us money, we must ask you to pay it but we will not charge you a penalty. Also, if you acted reasonably and in good faith we will not charge you interest.

If you make an honest mistake in trying to follow our information in this publication and you owe us money as a result, we will not charge you a penalty. However, we will ask you to pay the money, and we may also charge you interest. If correcting the mistake means we owe you money, we will pay it to you. We will also pay you any interest you are entitled to.

If you feel that this publication does not fully cover your circumstances, or you are unsure how it applies to you, you can seek further assistance from us.

We regularly revise our publications to take account of any changes to the law, so make sure that you have the latest information. If you are unsure, you can check for more recent information on our website at **ato.gov.au** or contact us.

This publication was current at August 2014.

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### PUBLISHED BY

Australian Taxation Office Canberra August 2014

JS 31287

Australian Government Australian Taxation Office Superannuation Standard choice form

For use by employers when offering employees a choice of fund and by employees to advise their employer of their chosen fund.

Se	ection A: Employee to complete				
1	Choice of superannuation (super) fund				
	I request that all my future super contributions be paid to: (place an $\chi$ in one of the boxes below)				
	The APRA fund or retirement savings account (RSA) I nominate D Complete items 2, 3 and 5				
	The self-managed super fund (SMSF) I nominate Complete items 2, 4 and 5				
	The super fund nominated by my employer (in section B) Oomplete items 2 and 5				
2	Your details				
	Name				
	Employee identification number (if applicable)				
	Tax file number (TFN)				
	You do not have to quote your TFN but if you do not provide it, your contributions may be taxed at a higher rate.				
	Your TFN also helps you keep track of your super and allows you to make personal contributions to your fund,				
3	Nominating your APRA fund or RSA				
	You will need current details from your APRA regulated fund or RSA to complete this item.				
	Fund ABN				
	Fund name				
	Fund address				
	Suburb/town State/territory Postcode				
	Fund phone				
	Unique superannuation identifier (USI)				
	Your account name (if applicable)				
	Your member number (if applicable)				

# **Required documentation**

You need to attach a letter from your fund stating that they are a complying fund and that they will accept contributions from your employer. Correct information about your super fund is needed for your employer to pay super contributions.

# 4 Nominating your self-managed super fund (SMSF)

You will need current details from your SMSF trustee to complete this item.

Fund ABN			
Fund name	A&		
Fund address			
Suburb/town		 State/territory	Postcode
Fund phone			
Fund electronic service address (ESA)			
Fund bank account			
BSB code (please include all six numbers)	Account number		

### **Required documentation**

You need to attach a document confirming the SMSF is an ATO regulated super fund. You can locate and print a copy of the compliance status for your SMSF by searching using the ABN or fund name in the Super Fund Lookup service at <a href="http://superfundlookup.gov.au/">http://superfundlookup.gov.au/</a>

If you are the trustee, or a director of the corporate trustee you can confirm that your SMSF will accept contributions from your employer by making the following declaration (place an 'X' in the box below):

] I am the trustee, or a director of the corporate trustee of the SMSF and I declare that the SMSF will accept contributions from my employer.

If you are not the trustee, or a director of the corporate trustee of the SMSF, then you must attach a letter from the trustee confirming that the fund will accept contributions from your employer.

# 5 Signature and date

If you have nominated your own fund in Item 3 or 4, check that you have attached the required documentation and then place an 'X' in the box below.

I have attached the relevant documentation.

### Signature

٦	Date		
	Day	Month	Year

Return the completed form to your employer as soon as possible.

# Section B: Employer to complete

You must complete this section before giving the form to an employee who is eligible to choose the super fund into which you pay their super contributions.

3	Your details
	Business name
	ABN
	Signature
	Date
	Day Month Year
7	Your nominated super fund
	If the employee does not choose their own super fund, you are required to pay super contributions on their behalf to the fund that you have nominated below:
	Super fund name
	Unique superannuation identifier (USI)
	Phone (for the product disclosure statement for this fund)

# Section C: Employer to complete

D Complete this section when your employee returns the form to you with section A completed.

# 8 Record of choice acceptance

In the two months after you receive the form from your employee you can make super contributions to either the fund you nominated or the fund the employee nominated. After the two-month period you must make payments to the fund chosen by the employee.

If you don't meet your obligations, including paying your e you may face penalties.	employee superannuation contributions to the correct fund,
Date employee's choice Day / Month / Year is received	Date you act on your / / Year employee's choice

Employers must keep the completed form for their own record for five years. Do not send it to the Australian Taxation Office, the employer's nominated fund or the employee's nominated fund.

# **PRIVACY STATEMENT**

The ATO does not collect this information; we provide this form as a means for employees to identify and provide necessary information to their employer. An employer is authorised to collect an employee's TFN under the *Superannuation Industry* (*Supervision*) *Act 1993*. It is not an offence for an employee not to quote their TFN. However, quoting a TFN reduces the risk of administrative errors and if the employee does not quote their TFN their contributions may be taxed at a higher rate. An employee can get more details regarding their privacy rights by contacting their superannuation fund.

# Tax file number declaration

Information you provide in this declaration will allow your payer to work out how much tax to withhold from payments made to you.

This is not a TFN application form. To apply for a TFN, go to **ato.gov.au/tfn** 

# Ferms we use

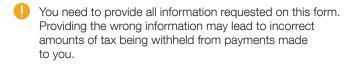
When we say:

- payer, we mean the business or individual making payments under the pay as you go (PAYG) withholding system.
- **payee**, we mean the individual being paid.

# Who should complete this form?

You should complete this form before you start to receive payments from a new payer – for example:

- payments for work and services as an employee, company director or office holder
- payments under return-to-work schemes, labour hire arrangements or other specified payments
- benefit and compensation payments
- superannuation benefits.



You do not need to complete this form if you:

- are a beneficiary wanting to provide your tax file number (TFN) to the trustee of a closely held trust. For more information, visit ato.gov.au/trustsandtfnwithholding
- have reached 60 years of age and started a super benefit that does not include an untaxed element for that benefit.
- are receiving superannuation benefits from a super fund and have been taken to have quoted your TFN to the trustee of the super fund.

# Section A: To be completed by the payee

# Question 1 What is your tax file number (TFN)?

You should give your TFN to your employer only after you start work for them. Never give your TFN in a job application or over the internet.

We and your payer are authorised by the *Taxation Administration Act 1953* to request your TFN. It's not an offence not to quote your TFN. However, quoting your TFN reduces the risk of administrative errors and having extra tax withheld. Your payer is required to withhold the top rate of tax from all payments made to you if you do not provide your TFN or claim an exemption from quoting your TFN.

# How do you find your TFN?

You can find your TFN on any of the following:

- your income tax notice of assessment
- correspondence we send you
- a payment summary your payer issues to you.

If you have a tax agent, they may also be able to tell you your TFN.

If you still can't find your TFN, you can:

- phone us on 13 28 61 between 8.00am and 6.00pm, Monday to Friday
- visit your nearest shopfront (phone us on 13 28 61 to make an appointment).

If you phone or visit us we need to know we are talking to the correct person before discussing your tax affairs. We will ask you for details only you, or your authorised representative would know.



# You don't have a TFN

If you don't have a TFN and want to provide a TFN to your payer, you will need to apply for one.

For more information about applying for a TFN, visit ato.gov.au/tfn

# You may be able to claim an exemption from quoting your TFN.

Print X in the appropriate box if you:

- have lodged a TFN application form or made an enguiry to obtain your TFN. You now have 28 days to provide your TFN to your payer, who must withhold at the standard rate during this time. After 28 days, if you have not given your TFN to your payer, they will withhold the top rate of tax from future payments
- are claiming an exemption from quoting a TFN because you are under 18 years of age and do not earn enough to pay tax, or you are an applicant or recipient of certain pensions, benefits or allowances from the
  - Department of Human Services however, you will need to quote your TFN if you receive a Newstart, Youth or sickness allowance, or an Austudy or parenting payment
  - Department of Veterans' Affairs a service pension under the Veterans' Entitlement Act 1986
  - Military Rehabilitation and Compensation Commission.

# Providing your TFN to your super fund

Your payer must give your TFN to the super fund they pay your contributions to. If your super fund does not have your TFN, you can provide it to them separately. This ensures:

- your super fund can accept all types of contributions to your accounts
- additional tax will not be imposed on contributions as a result of failing to provide your TFN
- you can trace different super accounts in your name.

For more information about providing your TFN to your super fund, visit ato.gov.au/supereligibility

# Question 2-5

Complete with your personal information.

# **Question 6** On what basis are you paid?

Check with your payer if you are not sure.

# **Question 7** Are you an Australian resident for tax purposes?

Generally, we consider you to be an Australian resident for tax purposes if you:

- have always lived in Australia or you have come to Australia and now live here permanently
- are an overseas student doing a course that takes more than six months to complete
- migrate to Australia and intend to reside here permanently.

If you go overseas temporarily and do not set up a permanent home in another country, you may continue to be treated as an Australian resident for tax purposes.

# Foreign resident tax rates are different

A higher rate of tax applies to a foreign resident's taxable income and foreign residents are not entitled to a tax-free threshold nor can they claim tax offsets to reduce withholding, unless you are in receipt of an Australian Government pension or allowance.



> To check your Australian residency status for tax purposes or for more information, visit ato.gov.au/residency

Answer **no** to this guestion if you are not an Australian resident for tax purposes, unless you are in receipt of an Australian Government pension or allowance. If you answer no, you must also answer **no** at question 10.

# **Question 8** Do you want to claim the tax-free threshold from this payer?

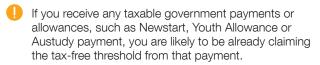
The tax-free threshold is the amount of income you can earn each financial year that is not taxed. By claiming the threshold, you reduce the amount of tax that is withheld from your pay during the year.

Answer yes if you want to claim the tax-free threshold, you are an Australian resident for tax purposes, and one of the following applies:

- you are not currently claiming the tax-free threshold from another payer
- vou are currently claiming the tax-free threshold from another payer and your total income from all sources will be less than the tax-free threshold.

Answer yes if you are a foreign resident in receipt of an Australian Government pension or allowance.

Otherwise answer no.



> For more information about the current tax-free threshold, which payer you should claim it from, or how to vary your withholding rate, visit ato.gov.au/taxfreethreshold

# Question 9

Do you want to claim the seniors and pensioners tax offset by reducing the amount withheld from payments made to you?

# Claim tax offsets with only one payer

You are not entitled to reduce your withholding amounts, or claim the seniors and pensioners tax offset (SAPTO), with more than one payer at the same time.

If you receive income from more than one source and need help with this question, phone 1300 360 221 between 8.00am and 6.00pm, Monday to Friday.

# How your income affects the amount of your tax offset

You must meet the eligibility conditions to receive SAPTO. Your rebate income, not your taxable income, determines the amount of SAPTO, if any, you will receive.

Answer yes if you are eligible and choose to claim SAPTO with this payer. To reduce the amount withheld from payments you receive during the year from this payer, you will also need to complete a Withholding declaration (NAT 3093).

Answer no if one of the following applies:

- you are not eligible for SAPTO
- vou are already claiming SAPTO with another paver
- you are eligible but want to claim your entitlement to the tax offset as a lump sum in your end-of-year income tax assessment.

 $\mathbf{\Sigma}$ For more information about your eligibility to claim the tax offset or rebate income, visit ato.gov.au/taxoffsets

# Question 10

Do you want to claim a zone, overseas forces or invalid and invalid carer tax offset by reducing the amount withheld from payments made to you?

# Claim tax offsets with only one payer

You are not entitled to claim tax offsets with more than one payer at the same time.

You may be eligible for one or more of the following:

- a zone tax offset if you live or work in certain remote or isolated areas of Australia
- an overseas forces tax offset if you serve overseas as a member of Australia's Defence Force or a United Nations armed force
- an invalid and invalid carer tax offset.

Answer yes to this question if you are eligible and choose to receive tax offsets by reducing the amount withheld from payments made to you from this payer. You also need to complete a Withholding declaration (NAT 3093).

Answer **no** to this question if you are either:

- not eligible for the tax offsets
- a foreign resident
- choose to receive any of these tax offsets as an end-of-year lump sum through the tax system
- are already claiming the offset from another payer.

For more information about your entitlement, visit ato.gov.au/taxoffsets

# Question 11

# (a) Do you have a Higher Education Loan Program (HELP), Student Start-up Loan (SSL) or Trade Support Loan (TSL) debt?

Answer yes if you have a HELP, SSL or TSL debt.

Answer no if you do not have a HELP, SSL or TSL debt, or you have repaid your debt in full.

You have a HELP debt if either:

- the Australian Government lent you money under HECS-HELP, FEE-HELP, OS-HELP, VET FEE-HELP or SA-HELP.
- you have a debt from the previous Higher Education Contribution Scheme (HECS).

# (b) Do you have a Financial Supplement debt?

Answer yes if you have a Financial Supplement debt.

Answer no if you do not have a Financial Supplement debt, or you have repaid your debt in full.

For information about repaying your HELP, SSL, TSL or Financial Supplement debt, visit ato.gov.au/getloaninfo

# Have you repaid your HELP, SSL, TSL or Financial Supplement debt?

When you have repaid your HELP, SSL, TSL or Financial Supplement debt, you need to complete a Withholding declaration (NAT 3093) notifying your payer of the change in your circumstances.

# Sign and date the declaration

Make sure you have answered all the questions in section A, then sign and date the declaration. Give your completed declaration to your payer to complete section B.

# Section B: To be completed by the payer

Important information for payers - see the reverse side of the form.

# Lodge online

Payers can lodge TFN declaration reports online if you have software that complies with our specifications.

For more information about lodging the TFN declaration report online, visit ato.gov.au/lodgetfndeclaration

# More information

# Internet

- For general information about TFNs, tax and super in Australia, including how to deal with us online, visit our website at ato.gov.au
- For information about applying for a TFN on the web, visit our website at **ato.gov.au/tfn**
- For information about your super, visit our website at ato.gov.au/superseeker

# Useful products

In addition to this TFN declaration, you may also need to complete and give your payer the following forms which you can download from our website at **ato.gov.au**:

Withholding declaration (NAT 3093) if you want to

- claim entitlement to the seniors and pensioners tax offset (question 9) or other tax offsets (question 10)
- change information you previously provided in a TFN declaration.
- Medicare levy variation declaration (NAT 0929) if you qualify for a reduced rate of Medicare levy or are liable for the Medicare levy surcharge. You can vary the amount your payer withholds from your payments.
- Standard choice form (NAT 13080) to choose a super fund for your employer to pay super contributions to. You can find information about your current super accounts and transfer any unnecessary super accounts through myGov after you have linked to the ATO. Temporary residents should visit ato.gov.au/departaustralia for more information about super.

Other forms and publications are also available from our website at **ato.gov.au/onlineordering** or by phoning **1300 720 092**.

# Phone

- Payee for more information, phone 13 28 61 between 8.00am and 6.00pm, Monday to Friday. If you want to vary your rate of withholding, phone 1300 360 221 between 8.00am and 6.00pm, Monday to Friday.
- Payer for more information, phone **13 28 66** between 8.00am and 6.00pm, Monday to Friday.

If you phone, we need to know we're talking to the right person before we can discuss your tax affairs. We'll ask for details only you, or someone you've authorised, would know. An authorised contact is someone you've previously told us can act on your behalf.

If you do not speak English well and need help from the ATO, phone the Translating and Interpreting Service on **13 14 50**.

If you are deaf, or have a hearing or speech impairment, phone the ATO through the National Relay Service (NRS) on the numbers listed below:

- TTY users phone 13 36 77 and ask for the ATO number you need (if you are calling from overseas, phone +61 7 3815 7799)
- Speak and Listen (speech-to-speech relay) users phone 1300 555 727 and ask for the ATO number you need (if you are calling from overseas, phone +61 7 3815 8000)
- Internet relay users connect to the NRS on relayservice.gov.au and ask for the ATO number you need.

If you would like further information about the National Relay Service, phone **1800 555 660** or email **helpdesk@relayservice.com.au** 

# Privacy of information

Taxation law authorises the ATO to collect information and to disclose it to other government agencies. For information about your privacy, go to **ato.gov.au/privacy** 

### Our commitment to you

We are committed to providing you with accurate, consistent and clear information to help you understand your rights and entitlements and meet your obligations.

If you follow our information in this publication and it turns out to be incorrect, or it is misleading and you make a mistake as a result, we must still apply the law correctly. If that means you owe us money, we must ask you to pay it but we will not charge you a penalty. Also, if you acted reasonably and in good faith we will not charge you interest.

If you make an honest mistake in trying to follow our information in this publication and you owe us money as a result, we will not charge you a penalty. However, we will ask you to pay the money, and we may also charge you interest. If correcting the mistake means we owe you money, we will pay it to you. We will also pay you any interest you are entitled to.

If you feel that this publication does not fully cover your circumstances, or you are unsure how it applies to you, you can seek further assistance from us.

We regularly revise our publications to take account of any changes to the law, so make sure that you have the latest information. If you are unsure, you can check for more recent information on our website at **ato.gov.au** or contact us.

This publication was current at July 2016.

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### Published by

Australian Taxation Office Canberra July 2016

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Australian Government	Tax file number de	
Australian Taxation Office	<ul> <li>This declaration is NOT an appli</li> <li>Use a black or blue pen and pri</li> <li>Print X in the appropriate boxes</li> <li>Read all the instructions includir</li> </ul>	rint clearly in BLOCK LETTERS.
Section A: To be completed by the 1 What is your tax file number (TFN)?		On what basis are you paid? (Select only one.)         Full-time       Part-time         Labour       Superannuation         or annuity       Casual         employment       hire
<ul> <li>For more the ATO</li> <li>information, see question 1 on page 2 of the instructions.</li> <li>OR I am claiming an exem 18 years of age and do not OR I am claiming an exem</li> </ul>	ption because I am under (V ot earn enough to pay tax. (B D xemption because I am in (C)	Are you an Australian resident for tax purposes? Yes No Visit ato.gov.au/residency to check) Yes No Obyou want to claim the tax-free threshold from this payer?
What is your name? Title: Mr Mrs     Surname or family name		iax-free threshold.       Answer no here and at question 10 if you are a foreign resident, except if you are a foreign resident in receipt of an Australian Government pension or allowance.
First given name		Do you want to claim the seniors and pensioners tax offset by reducing the amount withheld from payments made to you?         Yes       Complete a Withholding declaration (NAT 3093), but only if you are claiming the tax-free threshold from this payer. If you have more than one payer, see page 3 of the instructions.       No
3 If you have changed your name since you last dea provide your previous family name.		Do you want to claim a zone, overseas forces or invalid and invalid carer tax offset by reducing the amount withheld from payments made to you?         Yes       Complete a Withholding declaration (NAT 3093).
	Month Year	(a) Do you have a Higher Education Loan Program (HELP), Student Start-u Loan (SSL) or Trade Support Loan (TSL) debt?
4 What is your date of birth? //		Yes repayment that may be raised on your notice of assessment. No (b) Do you have a Financial Supplement debt?
Suburb/town/locality   State/territory   Postcode		Yes       Your payer will withhold additional amounts to cover any compulsory repayment that may be raised on your notice of assessment.       No         CLARATION by payee: I declare that the information I have given is true and correct. ature       Date         You MUST SIGN here       Date         There are penalties for deliberately making a false or misleading statement.
• Once section A is completed and signed, give Section B: To be completed by the		
What is your Australian business number (ABN) or withholding payer number?     If you don't have an ABN or withholding payer num have you applied for one?	r Branch number (if applicable)	What is your business address?
		State/territory Postcode
3 What is your legal name or registered business na (or your individual name if not in business)?	<b>5</b> W	Who is your contact person?       Business phone number
DECLARATION by payer: I declare that the information I hav	e given is true and correct.	If you no longer make payments to this payee, print X in this box.
Signature of payer       Date       Day       Day	Month Year	Return the completed original ATO copy to:       IMPORTANT         Australian Taxation Office       See next page for:         P0 Box 9004       payer obligations         PENRITH NSW 2740       Iodging online.
There are penalties for deliberately making a false or mist	leading statement.	

# Payer information

The following information will help you comply with your pay as you go (PAYG) withholding obligations.

# Is your employee entitled to work in Australia?

It is a criminal offence to knowingly or recklessly allow someone to work, or to refer someone for work, where that person is from overseas and is either in Australia illegally or is working in breach of their visa conditions.

People or companies convicted of these offences may face fines and/or imprisonment. To avoid penalties, ensure your prospective employee has a valid visa to work in Australia before you employ them. For more information and to check a visa holder's status online, visit the Department of Immigration and Border Protection website at **immi.gov.au** 

# Payer obligations

If you withhold amounts from payments, or are likely to withhold amounts, the payee may give you this form with section A completed. A TFN declaration applies to payments made after the declaration is provided to you. The information provided on this form is used to determine the amount of tax to be withheld from payments based on the PAYG withholding tax tables we publish. If the payee gives you another declaration, it overrides any previous declarations.

# Has your payee advised you that they have applied for a TFN, or enquired about their existing TFN?

Where the payee indicates at question 1 on this form that they have applied for an individual TFN, or enquired about their existing TFN, they have 28 days to give you their TFN. You must withhold tax for 28 days at the standard rate according to the PAYG withholding tax tables. After 28 days, if the payee has not given you their TFN, you must then withhold the top rate of tax from future payments, unless we tell you not to.

# If your payee has not given you a completed form you must:

- notify us within 14 days of the start of the withholding obligation by completing as much of the payee section of the form as you can. Print 'PAYER' in the payee declaration and lodge the form – see 'Lodging the form'.
- withhold the top rate of tax from any payment to that payee.

For a full list of tax tables, visit our website at ato.gov.au/taxtables

# Lodging the form

You need to lodge TFN declarations with us within 14 days after the form is either signed by the payee or completed by you (if not provided by the payee). **You need to retain a copy of the form for your records.** For information about storage and disposal, see below.

You may lodge the information:

- online lodge your TFN declaration reports using software that complies with our specifications. There is no need to complete section B of each form as the payer information is supplied by your software.
- by paper complete section B and send the original to us within 14 days.
- For more information about lodging your TFN declaration report online, visit our website at ato.gov.au/lodgetfndeclaration

# Provision of payee's TFN to the payee's super fund

If you make a super contribution for your payee, you need to give your payee's TFN to their super fund on the day of contribution, or if the payee has not yet quoted their TFN, within 14 days of receiving this form from your payee.

# Storing and disposing of TFN declarations

The TFN guidelines issued under the *Privacy Act 1988* require you to use secure methods when storing and disposing of TFN information. You may store a paper copy of the signed form or electronic files of scanned forms. Scanned forms must be clear and not altered in any way.

# If a payee:

- submits a new TFN declaration (NAT 3092), you must retain a copy of the earlier form for the current and following financial year.
- has not received payments from you for 12 months, you must retain a copy of the last completed form for the current and following financial year.

# Penalties

You may incur a penalty if you do not:

- Iodge TFN declarations with us
- keep a copy of completed TFN declarations for your records
- provide the payee's TFN to their super fund where the payee quoted their TFN to you.



# Fair Work Information Statement

From 1 January 2010, this Fair Work Information Statement is to be provided to all new employees by their employer as soon as possible after the commencement of employment. The Statement provides basic information on matters that will affect your employment. If you require further information, you can contact the **Fair Work Infoline** on **13 13 94** or visit **www.fairwork.gov.au**.

# The National Employment Standards

The Fair Work Act 2009 provides you with a safety net of minimum terms and conditions of employment through the National Employment Standards (NES).

### There are 10 minimum workplace entitlements in the NES:

- 1. A maximum standard working week of 38 hours for full-time employees, plus 'reasonable' additional hours.
- 2. A right to request flexible working arrangements.
- 3. Parental and adoption leave of 12 months (unpaid), with a right to request an additional 12 months.

Fair Work

OMBUDSMAN

- 4. Four weeks paid annual leave each year (pro rata).
- 5. Ten days paid personal/carer's leave each year (pro rata), two days paid compassionate leave for each permissible occasion, and two days unpaid carer's leave for each permissible occasion.
- 6. Community service leave for jury service or activities dealing with certain emergencies or natural disasters. This leave is unpaid except for jury service.
- 7. Long service leave.
- 8. Public holidays and the entitlement to be paid for ordinary hours on those days.
- 9. Notice of termination and redundancy pay.
- 10. The right for new employees to receive the Fair Work Information Statement.

A complete copy of the NES can be accessed at **www.fairwork.gov.au**. Please note that some conditions or limitations may apply to your entitlement to the NES. For instance, there are some exclusions for casual employees.

If you work for an employer who sells or transfers their business to a new owner, some of your NES entitlements may carry over to the new employer. Some NES entitlements which may carry over include personal/carer's leave, parental leave, and your right to request flexible working arrangements.

# Right to request flexible working arrangements

Requests for flexible working arrangements form part of the NES. You may request a change in your working arrangements, including changes in hours, patterns or location of work from your employer if you require flexibility because you:

- are the parent, or have responsibility for the care, of a child who is of school age or younger
- are a carer (within the meaning of the Carer Recognition Act 2010)
- have a disability
- are 55 or older
- are experiencing violence from a member of your family or
- provide care or support to a member of your immediate family or household, who requires care or support because they are experiencing violence from their family.

If you are a parent of a child or have responsibility for the care of a child and are returning to work after taking parental or adoption leave you may request to return to work on a part-time basis to help you care for the child.

# Modern awards

In addition to the NES, you may be covered by a modern award. These awards cover an industry or occupation and provide additional enforceable minimum employment standards. There is also a Miscellaneous Award that may cover employees who are not covered by any other modern award.

Modern awards may contain terms about minimum wages, penalty rates, types of employment, flexible working arrangements, hours of work, rest breaks, classifications, allowances, leave and leave loading, superannuation, and procedures for consultation, representation, and dispute settlement. They may also contain terms about industry specific redundancy entitlements.

If you are a manager or a high income employee, the modern award that covers your industry or occupation may not apply to you. For example, where your employer guarantees in writing that you will earn more than the high income threshold, currently set at \$142,000 per annum and indexed annually, a modern award will not apply, but the NES will.

# Agreement making

You may be involved in an enterprise bargaining process where your employer, you or your representative (such as a union or other bargaining representative) negotiate for an enterprise agreement. Once approved by the Fair Work Commission, an enterprise agreement is enforceable and provides for changes in the terms and conditions of employment that apply at your workplace.

There are specific rules relating to the enterprise bargaining process. These rules are about negotiation, voting, matters that can and cannot be included in an enterprise agreement, and how the agreement can be approved by the Fair Work Commission.

You and your employer have the right to be represented by a bargaining representative and must bargain in good faith when negotiating an enterprise agreement. There are also strict rules for taking industrial action. For information about making, varying, or terminating enterprise agreements visit the Fair Work Commission website, **www.fwc.gov.au**.

# Individual flexibility arrangements

Your modern award or enterprise agreement must include a flexibility term. This term allows you and your employer to agree to an Individual Flexibility Arrangement (IFA), which varies the effect of certain terms of your modern award or enterprise agreement. IFAs are designed to meet the needs of both you and your employer. You cannot be forced to make an IFA, however, if you choose to make an IFA, you must be better off overall. IFAs are to be in writing, and if you are under 18 years of age, your IFA must also be signed by your parent or guardian.

# Freedom of association and workplace rights (general protections)

The law not only provides you with rights, it ensures you can enforce them. It is unlawful for your employer to take adverse action against you because you have a workplace right. Adverse action could include dismissing you, refusing to employ you, negatively altering your position, or treating you differently for discriminatory reasons. Some of your workplace rights include the right to freedom of association (including the right to become or not to become a member of a union), and the right to be free from unlawful discrimination, undue influence and pressure.

If you have experienced adverse action by your employer, you can seek assistance from the Fair Work Ombudsman or the Fair Work Commission (applications relating to general protections where you have been dismissed must be lodged with the Fair Work Commission within 21 days).

# Termination of employment

Termination of employment can occur for a number of reasons, including redundancy, resignation and dismissal. When your employment relationship ends, you are entitled to receive any outstanding employment entitlements. This may include outstanding wages, payment in lieu of notice, payment for accrued annual leave and long service leave, and any applicable redundancy payments.

Your employer should not dismiss you in a manner that is 'harsh, unjust or unreasonable'. If this occurs, this may constitute unfair dismissal and you may be eligible to make an application to the Fair Work Commission for assistance. It is important to note that applications must be lodged within 21 days of dismissal. Special provisions apply to small businesses, including the Small Business Fair Dismissal Code. For further information on this code, please visit **www.fairwork.gov.au**.

# Right of entry

Right of entry refers to the rights and obligations of permit holders (generally a union official) to enter work premises. A permit holder must have a valid and current entry permit from the Fair Work Commission and, generally, must provide 24 hours notice of their intention to enter the premises. Entry may be for discussion purposes, or to investigate suspected contraventions of workplace laws that affect a member of the permit holder's organisation or occupational health and safety matters. A permit holder can inspect or copy certain documents, however, strict privacy restrictions apply to the permit holder, their organisation, and your employer.

# The Fair Work Ombudsman and the Fair Work Commission

The **Fair Work Ombudsman** is an independent statutory agency created under the *Fair Work Act 2009*, and is responsible for promoting harmonious, productive and cooperative Australian workplaces. The Fair Work Ombudsman educates employers and employees about workplace rights and obligations to ensure compliance with workplace laws. Where appropriate, the Fair Work Ombudsman will commence proceedings against employers, employees, and/ or their representatives who breach workplace laws.

If you require further information from the Fair Work Ombudsman, you can contact the **Fair Work Infoline** on **13 13 94** or visit **www.fairwork.gov.au**.

The Fair Work Commission is the national workplace relations tribunal established under the *Fair Work Act 2009*. The Fair Work Commission is an independent body with the authority to carry out a range of functions relating to the safety net of minimum wages and employment conditions, enterprise bargaining, industrial action, dispute resolution, termination of employment, and other workplace matters.

If you require further information, you can visit the Fair Work Commission website, www.fwc.gov.au.

The Fair Work Information Statement is prepared and published by the Fair Work Ombudsman in accordance with section 124 of the Fair Work Act 2009. © Copyright Fair Work Ombudsman. Last updated: July 2017.





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