

VEHICLE CLOSING ODOMETER DECLARATION

You are required to complete this declaration if:

- You are terminating a salary packaging arrangement which contains a novated or associate lease vehicle; or
- You have sold/disposed of a vehicle that is under a novated or associate lease arrangement; or
- You have paid out the finance contract (before lease expiry) on your novated lease arrangement; or
- Your novated lease residual is due or has been paid out; or
- Your associate lease arrangement has ended.

EMPLOYEE DETAILS					
Title		Date of Birth			
Given Name		Surname			
Residential Address					
Suburb		State		Postcode	
Phone (Home)		Phone (Work)			
Employer					

VEHICLE DETAILS				
Make		Model		Registration Number
Reason for Vehicle Termination	<input type="checkbox"/> I have sold/disposed of my Novated Lease vehicle <input type="checkbox"/> I have paid out my Novated Lease contract (before expiry) <input type="checkbox"/> My Novated Lease residual is due or has been paid out <input type="checkbox"/> My Associate Lease contract has ended <input type="checkbox"/> I have terminated employment with this employer <input type="checkbox"/> I have terminated my whole salary packaging arrangement with Southgate			
Vehicle Termination Date		Odometer Reading as at Vehicle Termination Date		Kms

DAYS UNAVAILABLE FOR PRIVATE USE	
<p>A vehicle will be regarded as “unavailable for private use” where the vehicle was:</p> <ul style="list-style-type: none"> ▪ Undergoing service or repairs for more than a continuous 24 hours period; or ▪ Stored at your employer’s business premises and all keys were held by your employer; or ▪ Locked in a commercial storage facility away from your place of residence and all keys were held by your employer. <p>Note: The days of drop-off and pick-up of the vehicle are NOT included in the number of “days unavailable”. If you have declared more than 4 “days unavailable” you must provide a written explanation for the days unavailable and attach supporting documentation.</p>	
Days <u>Unavailable</u> for Private Use	

EMPLOYEE SIGNATURE	
<p>I declare that the information I have provided is true and correct. I understand that any false or misleading declarations could result in additional Fringe Benefits Tax liability, fines and penalties and that I am liable for all costs incurred arising from these declarations.</p> <p>Where my package includes comprehensive vehicle insurance provided by Southgate, I acknowledge that the policy expires at the end of the month of vehicle termination/lease payout and I will arrange alternative vehicle insurance.</p>	
Signature	
Date	

<p><u>Please return your completed form to:</u></p> <p>Email: support@southgatesalpack.com.au OR Fax: 1300 500 150</p>	
---	--