

# Form

## Change to salary packaging arrangements

Fill out this form when you need to change your payment details, the amount you package or your payments.

Given name				Employer			
Surname				Email address			
Residential address							
Postal address							
Date of Birth	/	/	Phone No.		Payroll No.		AccessPay Subscriber No.

Consider if this change will need to revert to your previous arrangements

For how many payments? <i>(Please select one option only)</i> <small>*refer note page 2</small>	<input type="checkbox"/> Once off <input type="checkbox"/> Short term <input type="checkbox"/> Ongoing	\$	Amount per pay period
			Number of pay periods (if short term selected)

Next available pay period     
 Effective Date for Changes      /      /     
 Date to revert back on      /      /

*Please allow sufficient time for the changes to be applied*     
 *Use the date of your next pay day*

**List all payment you want AccessPay to make per pay period. To stop a payment please write STOP in the Total field**

Payment Description <i>(e.g. mortgage, rent, personal loan)</i>	Frequency Wk/Fn/Mth	Payment Method EFT, BPAY or CHQ	BSB / Biller Code	Account Number / Reference Number	Total

If you have nominated to allocate funds to a Salary Packaging Card, please specify the benefit type:

- General Living Expenses
- Entertainment Benefits
- Both

Would you like to order a partner card?

- Yes  No

Plus Card Fee	
Plus AccessPay Fee	
<b>New Total Salary Packaged Amount</b>	

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### Salary packaging card details

**Primary card holder** - Please tick the box of the identifying document and supply the corresponding document number:

- Australian Driver's Licence  
 Australian Proof of Age Card  
 Australian Passport  
 Other Passport – please specify country of issue: \_\_\_\_\_

Document number: \_\_\_\_\_  
(Example: licence number, card number, passport number)

**For partner card** - Please provide the following details for the Partner Card holder (if you have applied for one):

All given names \_\_\_\_\_

Surname \_\_\_\_\_

Date of Birth \_\_\_\_\_

Email address \_\_\_\_\_

**Note:**

- Once off: You would like this change to occur for one (1) pay period only.*  
*Short term: You would like this change to occur for a prescribed number of pay periods.*  
*Ongoing: You would like this change to continue until you advise AccessPay otherwise.*

**Salary Packaging and Employee Benefits Card Acknowledgments and Consents:**

1. I request to receive an AccessPay Salary Packaging and Employee Benefits Card and agree to receiving disclosures about this card online. I understand that the Product Disclosure Statement and Financial Services Guide is available online ([www.accesspay.com.au/mycard](http://www.accesspay.com.au/mycard)) and further information on how to activate my card will be sent to me with my card.
2. I understand the AccessPay Salary Packaging and Employee Benefits Card is issued by Heritage Bank Limited ABN 32 087 652 024, AFSL 240984 ACL 240984. I understand Heritage Bank Limited is not responsible for my salary deduction arrangements.
3. I confirm where information has been provided on behalf of a partner cardholder, the partner cardholder has provided me authority to request an AccessPay Salary Packaging and Employee Benefits Card on their behalf. I understand I will be liable to Heritage, my employer and my salary packaging provider for any loss arising from the use of the card by the partner cardholder.

*I request that the changes shown on this form be made to my salary packaging arrangements and confirm my continuing compliance with my employer's policies and procedures. I also confirm that any reimbursement request is in relation to expenses already paid by me.*

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Time:** \_\_\_\_\_ am / pm

**Note:** It is your responsibility to notify AccessPay immediately of any changes to this authority. You need to inform AccessPay of any change to your remuneration package.