

AccessPay

Change to salary packaging arrangements form

Send completed form to customerservice@accesspay.com.au or post to
PO Box 1238 Adelaide SA 5001

Transcriber's Note: Information to be filled in is indicated by underscores. Check boxes are indicated by square brackets enclosing an underscore .

Step 1: Help us identify you

First name: _____

Surname: _____

Date of birth: __/__/__

Subscriber number: _____

Employer name _____

Mobile Number: _____

Email address: _____

Step 2. Tell us when you want these changes to take place

Changes need to be submitted a minimum of 8 business days prior to your pay day (this could vary for weekly or monthly pay cycles). If start date is not specified, changes will take effect on your next pay date.

When would you like the changes to start?* __/__/__

Would you like this payment/s to be:

Ongoing

Once off

Short term

If short term, how many pay cycles should the change go for? _____

Step 3. Outline your salary packaging payments

Fill in all payments you would like made from the above date. You will need to include **all current payments and any changes**. The total at the bottom will be your new total deduction. Payments not listed will be removed.

	Which account would you like us to deposit funds into: BSB (max 6 digits)	Which account would you like us to deposit funds into: Account number (max 9 digits)	Which account would you like us to deposit funds into: Payment reference (if relevant)	Payment per pay cycle
Mortgage repayment (excluding investment properties)				\$
Personal loan repayment				\$
Rent				\$
Credit card				\$
Education payments (school fees, child care, HELP)				\$
Salary Packaging and Employee Benefits Card (General Living Expenses)	Please complete Salary Packaging and Employee Benefits Card application on page 2			\$
Salary Packaging and Employee Benefits Card (Entertainment Benefits)	Please complete Salary Packaging and Employee Benefits Card application on page 2			\$
Health insurance				\$
Household bills (rates, power, groceries etc)				\$

	Which account would you like us to deposit funds into: BSB (max 6 digits)	Which account would you like us to deposit funds into: Account number (max 9 digits)	Which account would you like us to deposit funds into: Payment reference (if relevant)	Payment per pay cycle
Entertainment Benefits				\$
Other. Please specify.				\$
				New Total salary packaging amount (for payments only, this excludes your ongoing fee) \$

See page 2 for the documentation you need to submit to support your payments. If supporting documentation is not provided, requesting changes will not be actioned.

Signature: _____

Date: __/__/__

Salary Packaging and Employee Benefits Card application

Primary Cardholder

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)

Partner card application:

Please provide the following details for the Partner Card holder (if you would like one). Partner cardholders must be 16 years or older.

All given names _____

Surname _____

Date of Birth __/__/____

Email address _____

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) 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: __/__/____

Supporting documentation required:

Payment type:	Please provide:
Mortgage repayment (excluding investment properties)	Current statement showing the BSB, account number, amount owing and 2 consecutive payments.
Personal loan repayment	Current statement showing the BSB, account number, amount owing and 2 consecutive payments.
Rent	Current lease or rental declaration showing your name, address, rent amount, length of lease and proof of 2 consecutive payments.
Credit card	Credit card statement showing amount owing and up to 12 months' worth of statements.
Education payments (school fees, child care, HELP)	Invoice showing amount owing and proof of up to 12 months' worth of payments.
Salary Packaging and Employee Benefits Card (General Living Expenses)	Form above.
Salary Packaging and Employee Benefits Card (Entertainment Benefits) Form above.	Form above.
Health insurance	Policy document showing the amount owing and proof of 2 consecutive payments.
Household bills (rates, power, groceries etc.)	Invoice showing payment details, amount owing and proof of payment
Entertainment Benefits Includes dine-in meals, holiday accommodation and car hire, and taxis.	Invoice showing amount owing and proof of payment.

Manage your changes online or download our app! Visit accesspay.com.au for more information.