

Information Privacy Act 2000

All information collected by the SRO is protected by secrecy provisions in Acts administered by the SRO and in addition, personal information you provide to the SRO is protected by the Information Privacy Act 2000. Any information collected from you is only used for the purposes of the Acts administered by the SRO. Information (including personal information) is not disclosed to third parties unless authorised by law, or with your consent.

Nomination of group member to claim the deduction

Note: Only one member of a group (within the meaning of section 9A of the Pay-roll Tax Act 1971) can claim the Victorian pay-roll tax statutory deduction. The purpose of this form is to nominate that member. From the effective date, any previous nominations will be revoked.

MEMBER NOMINATED TO CLAIM THE DEDUCTION

Client number	Legal name
<input type="text"/>	<input type="text"/>
Australian Company Number (ACN)	Australian Business Number (ABN)
<input type="text"/>	<input type="text"/>
Address	
<input type="text"/>	
	State <input type="text"/>
	Postcode <input type="text"/>
Date of joining group	This nomination is effective from
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

OTHER MEMBERS OF THE GROUP

Members who pay wages in Victoria (not including nominated member)

Client number	Legal name	ACN	ABN	Date of joining group
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

If insufficient space, please attach schedule

Members who pay wages outside Victoria only or members who do not pay wages but are located in Australia

Legal Name	ACN	ABN	Date of joining group
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

If insufficient space, please attach schedule

CERTIFICATION

I certify that the information provided in this application is correct and I am authorised on behalf of all members of the group to make this nomination.

Signature	Position	Date
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Name		
<input type="text"/>		
Telephone number	Facsimile number	
<input type="text"/>	<input type="text"/>	

Thank you for completing this nomination. A letter confirming this nomination will be sent shortly.

By correspondence

State Revenue Office, GPO Box 1641, MELBOURNE VIC 3001

In person

Customer Service Centre, Level 2, 121 Exhibition Street, Melbourne.

Hours of operation: Mon, Tues, Thurs, Fri – 8:30am to 4:30pm Wed – 8:30am to 1:00pm

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