

**APPROVED FORMAT FOR FRINGE BENEFITS TAX  
RELOCATION TRANSPORT DECLARATION**

I, \_\_\_\_\_  
(Full name of employee and employee number)

declare that, for the purpose of relocating my place of residence,

\_\_\_\_\_  
(State who travelled e.g. self, self and family)

Travelled in my car from \_\_\_\_\_  
(State place of departure)

to \_\_\_\_\_ on \_\_\_\_\_ 20 \_\_\_\_\_  
(Destination) (Date)

The car is \_\_\_\_\_  
(State make and model of car and whether rotary engine or not)

with an engine capacity (in cubic centimetres) of \_\_\_\_\_.

The total number of kilometres travelled in the car between the places of departure and destination was \_\_\_\_\_ and the number of family members (apart from myself) travelling in the car was \_\_\_\_\_.

Signature \_\_\_\_\_

Date \_\_\_\_\_

*Please note: Benefits may result in a reportable fringe benefit amount being reported on your payment summary.*