APPROVED FORMAT FOR FRINGE BENEFITS TAX LIVING-AWAY-FROM-HOME ALLOWANCE BENEFIT DECLARATION EMPLOYEES WHO MAINTAIN AN AUSTRALIAN HOME

I,										
(Full name of employee and employee number)										
declare	that	the	address	I	usually	reside	at	in	Australia	is
			(State the	place	where you	normally liv	e)			
Either my	self or m	y spouse	have an owner	rship i	nterest in the	e unit of acc	ommod	ation lo	cated at the add	dress
stated abo	ove. This	residence	e continues to	be av	ailable at ar	ny time for	my imr	nediate	use and enjoy	ment
during the	e period th	nat my du	ities of emplo	yment	require me	to live away	from it	t and it i	s where I expe	ct to
resume liv	ving when	that peri	od ends; and							
From			20		to			2	00	
			oyment require		·	from where	I usual	ly reside	e when in	
(S	tate all ad	dresses a	t which you re	esided	while away	from home i	n the pe	eriod sta	ted above)	
Signature										
Date										
Please no	ote: Benef	its may 1	esult in a rep	ortab	le fringe bei	nefit amoun	t being	reporte	d on your pay	ment
summary.	This for	n is to b	e used when a	an emj	ployee is abs	sent from th	eir nori	mal resi	dence in Austr	alia,

continues to maintains the home which is available for their use and enjoyment, intends to return to that

residence and for arrangements entered into after 1/10/12.