

SALARY PACKAGING

Employee form - living away from home allowance (LAFHA)

Please complete this form and email to salarypackaging@trinitas3.com.au

Contract start date		End date	
Number of adults (inc children 12 years +)		Number of children	
	Per week		
LAFHA - accommodation	\$		
LAFHA - food	\$		

- Australian employees MUST provide a letter of appointment and/or employment contract
- We require the provision of a Rental Agreement in order to substantiate the rent payable
- To ensure that we are able to provide a premium service, please let us know should your circumstances change (eg a rent increase) and provide supporting documentation.

I, _____ declare that

during the period from _____ to _____

I was required to live away from my usual place of residence in order to perform the duties of my employment and during that period my usual place of residence was:

(state the address where you usually live)

and the nature of the residence was: _____.

During the period, the place I actually resided in was:

(state the address at which you resided while away from home in the time period stated above)

Name		Signature		Date	
------	--	-----------	--	------	--