



SALARY SACRIFICING APPLICATION FORM NOVATED LEASE FOR A MOTOR VEHICLE

Complete and return to HR Operations, Office of Human Resources, Building AE, Werrington North

Employee No: _____ Title: _____

Surname: _____ First Name: _____

School/Unit: _____

Division: _____

Quotations for the supply of the motor vehicle for novated leasing are to be obtained from the chosen novation management company, as per guidelines. Attach a copy of the quotation you intend accepting to this form. Before entering into an agreement, the University will verify your eligibility to participate in this scheme with the company concerned. Once verified, both you and the University will be provided with confirmation of the lease of the vehicle and the fortnightly amount payable. The Office of Human Resources will also confirm with you the commencement pay period and amount payable. A fee of \$5.50 per fortnight (inclusive of GST) is payable to the University, for administering the lease.

EMPLOYEE DECLARATION

I acknowledge that I have sought or had the opportunity to seek financial advice prior entering into this salary sacrificing agreement.

I have read the University's Salary Sacrificing Guidelines and the terms and conditions of its suppliers and agree to adhere to these terms and conditions.

I agree to pay all costs associated with salary sacrificing, including all traffic and parking infringement notices, and acknowledge that such costs may change. I understand the Western Sydney University reserves the right to take legal action to recover any outstanding monies owed by me.

I will notify the Office of Human Resources of any proposed changes to my salary sacrifice arrangement and will not hold the University liable for any loss associated with salary packaging by me.

I acknowledge if I cease permanent or fixed term employment with the University that I will be responsible for all outstanding payments relating to my salary packaging arrangements.

I understand those costs associated with salary sacrificing will be charged to my salary package.

I agree that, upon termination of my employment for any reason, the University may withhold payment if my unpaid salary for a period of up to 14 days pending receipt of the final reconciliation statement regarding the lease from novated lease company.

In the event that my lease account is in deficit, I acknowledge and agree that the University may, after providing me with written notice of the amount of the deficit, deduct that amount from my unpaid salary prior to remitting the balance of the salary to my nominated bank account, and I undertake to repay any outstanding amount to the University within a further seven days in the event that my unpaid salary is insufficient to cover the amount of the deficit.

Full Name (please print): _____

Signature: _____ Date: _____