

### INSTRUCTION FORM

**IT'S QUICK AND EASY TO FILE YOUR TAX RETURN. JUST FOLLOW THE 3 STEPS BELOW.**

**1**

Fill out the form below (don't forget to sign the POA doc on Page 4).

**2**

Attach any Payment Summaries / Pay Slips and a copy of your passport or a photo ID.

**3**

Scan or photocopy and email to **Australia@taxback.com** or Fax to your nearest taxback office!

Thank you for choosing to use taxback.com. We look forward to working with you to apply for your Australian tax refund. In this pack, you will find everything you need to authorise taxback.com to apply for this refund on your behalf. Please read this pack carefully, sign and return to your nearest taxback.com office.

### CHECKLIST

*Before submitting this form, please ensure that you have completed all elements of the checklist below.*

**1. Australian Tax Refund application form (pages 2-3)**

Please fill in the enclosed form with as much detail as possible. Also name, sign and date page 3 at the places marked with a ✓.

**2. Power of Attorney and Declaration of Representative (page 4)**

Please fill in the form with your full name, tax file number, date of birth. Also sign and date it at the places marked with a ✓.

**3. Customer Agreement (page 5)**

Please fill in the form with your full name, tax file number and signature at the places marked with a ✓.

**4. Payment Summaries and final Pay Slips**

Please send us copies of your Payment summaries or final Pay Slips for each employer. If you had income apart from employment, please send us a relevant statement showing this income.

**5. Identification Document**

Please send us a clear and legible copy of your passport.

**taxback.com**

Level 2, 600 George Street  
Sydney  
NSW 2000

**AUSTRALIA**

**taxback.com**

IDA Business &  
Technology Park  
Ring Road, Kilkenny

**IRELAND**

**taxback.com**

1<sup>st</sup> Floor,  
277-281 Oxford Street  
London W1C 2DL

**UNITED KINGDOM**

**taxback.com**

333 N. Michigan Ave  
Suite 2415  
Chicago 60601 IL

**USA**

## TELL US ABOUT YOU

|  |                              |                               |  |
|--|------------------------------|-------------------------------|--|
| First Name   |                              | Middle Name                   | Family Name  |
| Mr <input type="checkbox"/>  | Mrs <input type="checkbox"/> | Miss <input type="checkbox"/> | Date of Birth ____/____/____                             |
| Telephone  |                              | Mobile                        | Email  |
| Home country address   |                              | Home country phone            |  |
| How did you hear about our company?  |                              | Nationality                   |  |
| Did you have an Australian Business Number (ABN) and incurred any income under it? |                              |                               | Yes <input type="checkbox"/> No <input type="checkbox"/> |

## TELL US ABOUT YOUR STAY IN AUSTRALIA

|  |  |
|--|--|
| Tax File Number: _____   | Visa Type  |
| Date of Arrival in Australia ____/____/____  | Date of Departure from Australia ____/____/____  |
| Have you applied for a refund for any tax year(s) from the ATO (previous to this application) Yes, 2009 <input type="checkbox"/> 2010 <input type="checkbox"/> Other _____ No <input type="checkbox"/> |  |
| Have you received any other income from sources inside Australia (eg bank interest, dividends, etc)? Yes <input type="checkbox"/> No <input type="checkbox"/>  |  |
| Did your spouse accompany you to Australia? Yes <input type="checkbox"/> No <input type="checkbox"/>   |  |
| Have you worked in any other country? UK <input type="checkbox"/> Ireland <input type="checkbox"/> Other <input type="checkbox"/>  | Have you applied for a tax refund from there? Yes <input type="checkbox"/> No <input type="checkbox"/> |

## EMPLOYMENT INFORMATION

How many employers did you have in Australia?

**If you had more than two employers please provide employment information on a separate sheet.**

### EMPLOYER 1

|  |                          |
|--|--------------------------|
| Company name   | City / Town              |
| Job Title  | Email / Phone (if known) |
| Started ____/____/____   | Finished ____/____/____  |
| Are you a member of a superannuation fund? Yes <input type="checkbox"/> No <input type="checkbox"/>            |                          |
| Do you have your PAYG / final payslip? Yes <input type="checkbox"/> No <input type="checkbox"/>                | Name of Fund:            |
| If no, would you like us to track them down for you?* Yes <input type="checkbox"/> No <input type="checkbox"/> | Member Number (if known) |

### EMPLOYER 2

|  |                          |
|--|--------------------------|
| Company name   | City / Town              |
| Job Title  | Email / Phone (if known) |
| Started ____/____/____   | Finished ____/____/____  |
| Are you a member of a superannuation fund? Yes <input type="checkbox"/> No <input type="checkbox"/>            |                          |
| Do you have your PAYG / final payslip? Yes <input type="checkbox"/> No <input type="checkbox"/>                | Name of Fund:            |
| If no, would you like us to track them down for you?* Yes <input type="checkbox"/> No <input type="checkbox"/> | Member Number (if known) |

\*Document retrieval fee applies

**The questionnaire is to help us establish your residency status for tax purposes in Australia. In order to be considered as resident for tax purposes you should display behaviour, habits and characteristics similar to that of a permanent resident in Australia.**

**RESIDENCY QUESTIONNAIRE**

|  |  |
|--|--|
| Have you been (or do you intend to stay) in Australia for 6 months or more?            | Yes <input type="checkbox"/> No <input type="checkbox"/>   |
| Do you plan to settle in Australia long-term or apply to become an Australian citizen? | Yes <input type="checkbox"/> No <input type="checkbox"/>   |
| What are your living arrangements in Australia?  | staying with family or friends <input type="checkbox"/> own or buying home <input type="checkbox"/> renting or leasing accommodation <input type="checkbox"/> hotel, motel, hostel <input type="checkbox"/>  |
| What is your main reason for being in Australia?                                       | contract employment <input type="checkbox"/> permanent employment <input type="checkbox"/> temporary employment <input type="checkbox"/> travel <input type="checkbox"/> education <input type="checkbox"/> event attendance <input type="checkbox"/> visiting friends or relatives <input type="checkbox"/> |
| Where are most of your personal belongings located?                                    |  |
| Have you joined any clubs, gyms or other networks during your stay in Australia?       | Yes <input type="checkbox"/> No <input type="checkbox"/>   |

**This is what you need to fill out so we can get you the maximum legal refund. Please give as much detail as possible.**

**OFFSETS AND EXPENSES**

Please provide information on any location you have lived in for more than three months when in Australia:

|            |                     |                   |
|------------|---------------------|-------------------|
| Location 1 | From ____/____/____ | To ____/____/____ |
| Location 2 | From ____/____/____ | To ____/____/____ |
| Location 3 | From ____/____/____ | To ____/____/____ |

|   |  |  |
|---|--|--|
| Have you paid any tax agent's fees in Australia?            | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, please specify amount \$_____ and tax year _____.              |
| Do you have Australian private health insurance?            | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, please send us a copy of your insurance policy statement.      |
| Did you incur Medical Expenses of over \$2000 in Australia? | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, please attach copies of receipts or other supporting evidence. |
| Have you received a Medicare Levy Exempt Certificate?       | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, please attach a copy of your certificate.                      |
| Did you make any donations to Australian charities?         | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, please attach copies of receipts or other supporting evidence. |

**WORK-RELATED EXPENSES**

| Work-related expenses that were not reimbursed by your employer | Amount \$  | Details |
|---|--|---------|
| Did you have a compulsory work uniform                          | Yes <input type="checkbox"/> No <input type="checkbox"/> |         |
| Work - related telephone calls                                  | Yes <input type="checkbox"/> No <input type="checkbox"/> |         |
| Tools   | Yes <input type="checkbox"/> No <input type="checkbox"/> |         |
| Training Courses that were directly related to your job         | Yes <input type="checkbox"/> No <input type="checkbox"/> |         |
| Union Fees  | Yes <input type="checkbox"/> No <input type="checkbox"/> |         |
| Other (please specify)  |  |         |

If you had expenses in excess of \$300, please include any supporting receipts with your application.

|  |                     |
|--|---------------------|
| I declare that the information provided above is true and correct.   | Date ____/____/____ |
| Name in print ✓  | Signature ✓         |
| <input type="checkbox"/> I have read and understood the Ts & Cs at <a href="http://www.taxback.com/termsandconditions">http://www.taxback.com/termsandconditions</a> |                     |

### POWER OF ATTORNEY AND DECLARATION OF REPRESENTATIVE

**IMPORTANT** – This is the legal document that you must sign in order for us to proceed with your refund. Please only fill out the fields where you see the ✓ indicated.

|                                   |                                    |
|-----------------------------------|------------------------------------|
| Taxpayer Name ✓                   |                                    |
| Tax File Number (only if known) ✓ | Date of birth ✓ ____ / ____ / ____ |

hereby appoint the following representative as attorney- in fact:

**taxback.com, Level 2, 600 George Street, Sydney NSW, Australia**

to act as the taxpayers legal representative for the following matters

Please tick the other years for which you would like us to organise an income tax return for you or cross out any which do not apply

| Type of Tax    | Tax years  |  |  |   |
|----------------|--|--|--|---|
| Income tax     | 1 <sup>st</sup> July 2011 – 30 <sup>th</sup> June 2012 <input checked="" type="checkbox"/> | 1 <sup>st</sup> July 2010 – 30 <sup>th</sup> June 2011 <input checked="" type="checkbox"/> | 1 <sup>st</sup> July 2009 – 30 <sup>th</sup> June 2010 <input checked="" type="checkbox"/> | 1 <sup>st</sup> July 2008 – 30 <sup>th</sup> June 2009 <input type="checkbox"/> |
|                | 1 <sup>st</sup> July 2007 – 30 <sup>th</sup> June 2008 <input type="checkbox"/>            | 1 <sup>st</sup> July 2006 – 30 <sup>th</sup> June 2007 <input type="checkbox"/>            | 1 <sup>st</sup> July 2005 – 30 <sup>th</sup> June 2006 <input type="checkbox"/>            | 1 <sup>st</sup> July 2004 – 30 <sup>th</sup> June 2005 <input type="checkbox"/> |
|                | Other  |  |  |   |
| Superannuation | <input checked="" type="checkbox"/>  |  |  |   |

#### Acts authorised:

The representative is authorised to receive and inspect confidential tax information and to perform any and all acts that I can perform with respect to the tax types and periods described above.

#### This includes:

- A) requesting and receiving from my employer(s) the group certificate, superannuation details or TFN; and
- B) obtaining information from any superannuation fund of which I, the taxpayer, may be a member in relation to any benefit to which I may be entitled; and
- C) signing any agreements, consents or other documents (including superannuation claim forms) required to refund any overpaid taxes or facilitate the payment of any superannuation benefits; and
- D) requesting my tax assessment prior to the end of the financial year and arranging the refund to be sent to the bank account of my representative.

I agree to and accept the terms and conditions of service as written online at [www.taxback.com](http://www.taxback.com) and to any changes in the terms and conditions which Taxback may effect from time to time, and to the fees of the agent which represents the services I have requested and which are provided by taxback.com and/or its affiliate companies.

I understand that once my refund is processed, I will be contacted by the Agent with regard to payment options for receiving my refund and will be able to provide my bank details.

I understand that this document will be used when filing my tax return and that it is valid for two years from the date of signing.

I declare that the information provided is true and correct.

|                      |                           |
|----------------------|---------------------------|
| Taxpayer Signature ✓ | Date ✓ ____ / ____ / ____ |
| Print name ✓         |                           |

#### FOR TAXBACK.COM USE

#### I declare that:

- ⇒ I have prepared this income tax return in accordance with the information supplied by the individual.
- ⇒ I have received a declaration made by the individual that the information provided to me for the preparation of this document is true and correct; and
- ⇒ I am authorised by the individual to give the information in this document to the Commissioner.

|                      |                         |
|----------------------|-------------------------|
| Accountant Signature | Date ____ / ____ / ____ |
| Print name           |                         |

**CUSTOMER AGREEMENT**

*The terms and conditions below refer to the taxback.com tax returns and refund services. Please read these points in full and ensure you understand them before signing.*

**I confirm that:**

1. I understand that taxback.com is a trading name for the services of Taxback Inc., Chicago, USA, and hereby contract with Taxback Inc. to carry out the services described herewith.
2. I understand that Taxback Inc will utilise its parent company Taxback and its subsidiary and affiliate companies, including Taxback PTY Ltd, provide local market tax office co-ordination and support where necessary and that the contract remains with Taxback Inc for the duration of the service.
3. I have signed the necessary power of attorneys to authorise Taxback. Inc, and / or its subsidiary undertakings trading as taxback.com and referred to hereafter as the Agent, to prepare this tax return and represent me before the Australian Tax Office (ATO).
4. I have not filed and will not file an income tax return or apply for an income tax refund for the Australian tax year I have authorised taxback.com to apply for and will not authorise any other party to do so on my behalf.
5. I authorise the Agent to receive all correspondence from the ATO on my behalf.
6. I agree to and accept the terms and conditions of service as written online at [www.taxback.com](http://www.taxback.com) and to any changes in the terms and conditions which Taxback may affect from time to time, and to the fees of the agent which represents the services I have requested and which are provided by Taxback and/or its affiliate companies.
7. I understand that information collected in writing and/or verbally for Australian tax return and superannuation filing services can and may be used for internal auditing purposes by taxback.com and provided to the Australian Tax Office (ATO) for external auditing purposes, subject to relevant data protection legislation.
8. I confirm that I have given the Agent all information needed and available to me and agree to co-operate and provide additional information as required at any stage of the tax refund process.
9. I understand that taxback.com will submit my application to the relevant tax office as soon as I have been informed of the refund amount and have sent all necessary documentation. Should I wish to cancel my application, I will contact taxback.com immediately. I understand that while taxback.com will make every effort to recall my application, this may not be possible.
10. I commit to updating the Agent of any changes in my contact details.
11. I commit to the terms of this agreement with the Agent in Australia, under Australian law.

|                 |       |
|-----------------|-------|
| Signature ✓     | TFN ✓ |
| Name in print ✓ |       |