

APPOINTMENT OF TAX AGENT/ELECTRONIC LODGEMENT DELCLARATION (INDIVIDUAL AND/OR NON-INDIVIDUAL)

I hereby appoint Elyon Enterprises Pty Ltd (Trading as the agent, My Tax Zone) and authorise the agent to act as my tax agent, and to lodge my tax return/s electronically or otherwise. I have willingly supplied my Tax File Numbers. I acknowledge that once my returns/s is lodged the subsequent time taken is in no way the responsibility of the agent. I further authorise the agent to deal with or discuss any child support matters with any appropriate authority, which may effect my probable tax consequences.

DECLARATION

I declare that all information in the Individual, Partnership, Trust, Company, Superannuation Fund or Amended Taxation return is true and correct to the best of my ability, and any error in supplying information is solely mine. I have declared all income received in accordance with the requirements of the Australian Taxation Office (ATO). This includes income received from an employer, Centrelink, business, capital gains, interest, dividends, rental receipts and any share of income from joint investments. All interest received including from Savings Banks, Fixed Deposits, Credit Unions, Building Societies and Personal Loans has been included in the Taxation Return even if tax has already been deducted. All company dividends received and any distributions from Managed Fund/Trusts is included. I confirm that any Award Transport Allowance received has been included as income and any deduction in regard to this complies with S8(1) of the Tax Act. For any tax offset claim I have provided relevant documents and for any Family Tax Benefit claim I have provided all details of my dependants and their income.

SUBSTANTIATION

I have available all the necessary receipts and other documentary evidence to substantiate all deductions claimed in the Taxation Return and can make them available if required by the ATO. I understand what constitutes a receipt and the requirements to retain documentary evidence for 5 years.

FINANCIAL PRODUCT ADVICE

Further I acknowledge it is possible that the taxation advice received from the agent may also constitute "financial product advice" within the meaning of that term in Chapter 7 of the Corporations Act 2001. The agent has advised me that the agent is not licensed to provide financial product advice and tax is only one of the matters that must be considered when making a decision on a financial product. The agent has advised that I should consider taking advice from the holder of an Australian Financial Services License before making a decision on a financial product. The fact the agent is required under the Corporations Act to provide this warning does not in any way affect the agent's ability to provide taxation advice and in particular, the specific tax advice that may have been received in any tax matters and all other related matters.

FURTHER ASSISTANCE

I Acknowledge the option to accept the agent's assistance with taxation audits with the express understanding that assistance is only available if the agent is contracted when audit is first notified. I further acknowledge that any non-tax service, financial products, travel or related service that may be used are accepted by myself independently and is done so at my sole discretion and without any recourse to the agent.

PAY ON REFUND

I agree to use the FEE paid from Refund service if I have not paid the agent on or before the date of my signature. Accordingly, I request to pay accounting fees from my tax refund. I understand I will receive the balance of my tax refund deposited electronically to the stated account below. I accept that I am responsible for providing correct information and that incorrect information may cause delays in receiving my refund money.

I authorise you to direct the ATO to deposit my tax refund into the relevant trust account and to deduct fees as per the calculation below. The balance remaining after deduction of the listed fees is to be repaid to my nominated bank account below. I acknowledge that:

- Should any variation arise with the Australian Tax Office (ATO) or my refund cheque is forwarded to me in error, I will pay the fee owing directly within 7 days of written notice.
- Where due to an error on the part of either NPF Pty Ltd, the ATO or myself, payment is made to me in excess of the correct amount due to me by the ATO, I will refund the difference within 7 days. I further understand that in the event of me not repaying any outstanding amount, I am liable for collection costs and charges.
- I further agree that as per (a) & (b), if I do not refund the difference within 7 days, I authorise all or part of the difference to be repaid from my nominated bank account below. I authorise NPF Pty Ltd (ABN 36 085 841 756 user ID 080 402), to make this deduction on *Amiet Taxation Services/My Tax Zone's* behalf. I am the authorised signatory of the stated account/card. I agree not to cancel this authority until any amount outstanding is repaid.
- There are no amounts outstanding to the ATO or in relation to child support and/or Centerlink in my name.
- Privacy: I understand and authorise that my Tax File Number (TFN) may be used for the purposes of reconciliation in paying my fees from my refund. It is under no circumstances to be made public.

ELYON ENTERPRISES PTY LTD T/AS My Tax Zone PRIVACY STATEMENT

Under the Privacy Act, you usually have a right to access personal information that we collect upon request. The information we are collecting is for the purpose of providing taxation, accounting and other related advice. We may also use it to send you information (delete where not applicable)

- To send newsletters concerning various financial matters which we believe would be of interest to you;
 - To invite you to seminars or events; and
 - To inform you of developments at the agent and other services that we can provide.
- This information may be disclosed to the following organisations(delete as not applicable) Australian Taxation Office, Our solicitors; related companies or affiliate practices which may receive information of this kind; or to any other organisations to which we usually disclose information of this kind.

CONSENT CLAUSE

I acknowledge that I have read the above privacy statement and consent to the uses and disclosures listed therein and to other uses and disclosures allowed under the Act. I also consent to the transfer of our information, including personal information and tax file numbers, to another organisation on the sale, transfer or disposal of your business.

I understand that by signing this declaration, in the event of me not paying the fee and all related charges in full, consent is given to Elyon Enterprises Pty Ltd to; Disclose to a credit reporting agency certain personal information about me including; identity particulars; payments which may become more than 60 days overdue and also advise that payments are no longer overdue or that my debt has been discharged. You can contact the CEO regarding any of the above matters on (07) 3208 3888, by mail at P O Box, WOODRIGE QLD 4114 or by email at dmaynard@mytaxzone.com.au.

Name:

Address:

Contact Bus. Hrs:.....Contact After Hrs:.....

Account Details for Deposit of Funds

BSB :

Account Number :

Account Name :

Authorised :

Date :

Forward by:

Mail >> My Tax Zone, PO Box 368 Woodridge, 4114
Fax >> 07 38089589
Email >> lodge@mytaxzone.com.au
Delivery >> Shop 5, 84 Wembley Rd, Woodridge, Q 4114

PERSONAL DETAILS

Surname _____

First Name(s) _____

Address (Home) _____

_____ State _____ Postcode _____

Address (Postal – if different from above) _____

_____ State _____ Postcode _____

D.O.B ____/____/____ Tax File Number _____

PERSONAL CONTACT DETAILS**TELEPHONE:**

Work _____

Home _____

Mobile _____

Fax _____

Email _____

PAYMENT**I WISH TO PAY BY:** Cheque Credit Card (See below) Pay on refund - Small additional fee applies (see authority sheet)

If you wish to pay for your Return using your credit card please include details here: (My Tax Zone will contact you to advise the fee before charging the card)

Card type: Visa Mastercard

Card No. _____ / _____ / _____ / _____

Expiry _____ / _____

Name on card _____

Signature _____

If you wish to have your refund directly credited to your bank account OR If you wish to have the fee deducted from your refund please provide your bank account details on the reverse of this form.

IMPORTANT – Please sign the lodgement declaration authority on the