



FULL NAME: [input field]

DATE OF BIRTH: [input field]

TAX FILE NO: [input field]

EMAIL ADDRESS: [input field]

HOME PHONE: [input field]

WORK PHONE: [input field]

OCCUPATION: [input field]

STREET ADDRESS: STREET: [input field] STATE: [input field]

CITY/SUBURB: [input field] POST CODE: [input field]

POSTAL ADDRESS: PO BOX/STREET: [input field] STATE: [input field]

If different from above

CITY/SUBURB: [input field] POST CODE: [input field]

BANK ACCOUNT FOR REFUND ACCOUNT HOLDER NAME: [input field]

BSB: [input field] ACCOUNT NO: [input field]

SPOUSE DETAILS

FULL NAME: [input field]

DATE OF BIRTH: [input field]

INCOME: [input field]

CHILDRENS / DEPENDANTS DETAILS

FULL NAMES & DATE OF BIRTH: [input field]



CHECKLIST

- Do you own any shares?
- Do you own any units in investment trusts?
- Do you have a rental property?
- Have you sold any investments during the financial year?
- Do you receive any payments from Centrelink?
- Do you have child support debts?
- Have you taken money out of your super fund during the financial year?
- Do you have any other sources of income?

ADDITIONAL INFORMATION

PAYMENT METHOD

By selecting one of the options below I acknowledge that my return will not be lodged until payment is made or fee from refund is signed.

- CREDIT CARD
I will provide credit card details to ClarityNT.
I understand that my returns will not be lodged until my fees are paid in full.
- DIRECT DEBIT
I will pay my fees by internet deposit.
I understand that my returns will not be lodged until my fees are paid in full.
- FEE FROM REFUND
Please deduct my ClarityNT fees from my tax refund for an additional fee of \$40. The balance of my refund can be deposited directly into my nominated account.