

| PATOW Tax Variation | - real eliding 30 Julie 2022 | | |
|--|---|--|--|
| Name of Applicant 1: | Name of Applicant 2: | | |
| Date of Birth: | Date of Birth: | | |
| Employer Name: | Employer Name: | | |
| Employee I.D. (if known): | Employee I.D. (if known): | | |
| Employer ABN: | Employer ABN: | | |
| Employer Payroll Address & Telephone Number: | Employer Payroll Address & Telephone Number: | | |
| Address: | Address: | | |
| PH: | PH: | | |
| Job Description: | Job Description: | | |
| Annual Base Salary: | Annual Base Salary: | | |
| Other Salary \$ (please specify below): | Other Salary \$ (please specify below): | | |
| Please specify: Bonus Commission | Please specify: Bonus Commission | | |
| Overtime Other: | Overtime Other: | | |
| Please provide a recent pay slip. ATTACHED (should your salary be expected to increase from 1 July 2021 please advise details) | Please provide a recent pay slip. ATTACHED (should your salary be expected to increase from 1 July 2021 please advise details) | | |
| Do you have a HECS debt: YES NO | Do you have a HECS debt: YES NO | | |
| Please provide description and amount of any reportable fringe benefits: | Please provide description and amount of any reportable fringe benefits: | | |
| Are you currently salary sacrificing into superannuation? | Are you currently salary sacrificing into superannuation? | | |
| YES NO | YES NO | | |
| Do you have Private Hospital Cover? | Do you have Private Hospital Cover? | | |
| YES NO | YES NO | | |
| | circumstances change during the year (eg. Salary ate of loan, etc.) as this may result in the need to prevent a year-end tax liability arising. | | |

I hereby declare that the information supplied is accurate, to the best of my knowledge: Signature of Taxpayer Name of Taxpayer

| Please complete following details for each investment proper | erty owned. | | |
|---|--|-------------------------|--|
| Property 1: | Insurances: | | |
| Percentage of ownership: e.g. (Party 1 = 99% & Party 2 = 1%) | | | |
| Owner 1: Owner 2: | _ Please provide loan statem | nonte for all loans | |
| Address: | | | |
| | Loan Balance/s as at [date] _ | : | |
| Date of Purchase: | _ Loan 1: | Interest Rate: | |
| Completion Date: | | Variable interest rate | |
| Weekly Rental Income: (or expected rental income upon completion) | - Principal & Interest | Interest only | |
| Proposed rental increases: | Loan 2: | Interest Rate: | |
| Date:\$ Estimated Council and Water Rates: | | Variable interest rate | |
| | Principal & Interest | Interest only | |
| Strata Levies: (Body Corporate fees – if applicable) | - | | |
| Property 2: | Insurances: | | |
| Percentage of ownership: e.g. (Party 1 = 99% & Party 2 = 1%) | | | |
| Owner 1: Owner 2: | _ | | |
| Address: | Please provide loan statem associated with this proper | | |
| | Loan Balance/s as at [date] _ | : | |
| Date of Purchase: | Loan 1: | Interest Rate: | |
| Completion Date: (if property is under construction) | Fixed interest rate | Variable interest rate | |
| Weekly Rental Income: (or expected rental income upon completion) | Principal & Interest | Interest only | |
| Proposed rental increases: Date:\$ | Loan 2: | _ Interest Rate: | |
| Estimated Council and Water Rates: | Fixed interest rate | Variable interest rate | |
| Ctrata Laviana | Principal & Interest | Interest only | |
| Strata Levies: (Body Corporate fees – if applicable) | | | |
| Would you like a complimentary review of | your interest rates and | loan etructures by a | |
| WSC Group Finance Lending Manager? | <u></u> | at the moment | |
| | | | |
| Would you like a review of your personal insu ensure you and your family have adequate pro | | Insurance Specialist to | |
| Not at the moment Yes (if yes, p | please provide a copy of your mo | st recent statement) | |

| Please complete following details for each investment property | owned. | |
|---|---|--|
| Property 3: | Insurances: | |
| Percentage of ownership: e.g. (Party 1 = 99% & Party 2 = 1%) | | |
| Owner 1: Owner 2: | | |
| Address: | Please provide loan statements for all loans associated with this property. | |
| | Loan Balance/s as at [date]: | |
| Date of Purchase: | Loan 1: | Interest Rate: |
| Completion Date:(if property is under construction) | | Variable interest rate |
| Weekly Rental Income: (or expected rental income upon completion) | Principal & Interest | Interest only |
| Proposed rental increases: | Loan 2: | Interest Rate: |
| Date:\$\$ Estimated Council and Water Rates: | Fixed interest rate | Variable interest rate |
| | Principal & Interest | Interest only |
| Strata Levies: (Body Corporate fees – if applicable) | | |
| Property 4: | Insurances: | |
| Percentage of ownership: e.g. (Party 1 = 99% & Party 2 = 1%) | | |
| Owner 1: Owner 2: | | |
| Address: | Please provide loan statements for all loans associated with this property. | |
| | Loan Balance/s as at [date]: | |
| Date of Purchase: | Loan 1: | Interest Rate: |
| Completion Date: (if property is under construction) | Fixed interest rate | Variable interest rate |
| | | |
| Weekly Rental Income: (or expected rental income upon completion) | Principal & Interest | Interest only |
| Weekly Rental Income: (or expected rental income upon completion) Proposed rental increases: | · | · |
| (or expected rental income upon completion) | Principal & Interest Loan 2: | · |
| (or expected rental income upon completion) Proposed rental increases: | · | · |
| (or expected rental income upon completion) Proposed rental increases: Date:\$ | Loan 2: | Interest Rate: |
| (or expected rental income upon completion) Proposed rental increases: Date:\$ | Loan 2:Fixed interest rate | Interest Rate: Variable interest rate |

- Please provide a purchase settlement statement for each property if it has not already been provided
- Please provide borrowing costs schedules for each loan if it has not already been provided

Please note: For any assistance in completing this application please do not hesitate to contact our office.

NOTES: