

South Australian Building Industry Redundancy Scheme Trust PO BOX 321 UNLEY BC, SA 5061 58A Greenhill Rd Wayville 5034 South Australia T: (08) 8373 0122 F: (08) 8373 1929 E: enquiries@birst.com.au

emailed, faxed or posted to BIRST.

CLAIM FORM

EMPLOYER TO COMPLETE

Employee's detail			
Employee's name:			
Address:			
	Postcode:		
Date of Birth:	BIRST No:		
Employer's detail			
Employer's name:			
Address:			
	Postcode:		
Employer No:			
The above employee was terminated on	due to:	Genuine Redundancy For tax purposes and for the purposes	
Genuine Redundancy		of making a claim under BIRST, genuine redundancy occurs when an employee, being	
Resignation		under pension age, is dismissed from their	
Other reason (please specify)		position because their employer has determined that the position is superfluous to the employer's needs, and there is no arrangement for the employee to be provided with other	
Employer's signature Da	ate	employment within the employer's business or that of a related entity.	
EMPLOYEE TO COMPLETE		Tax File Number	
Mobile No:		It is not an offence, not to quote your Tax File	
Email:		Number. However, we are obliged to deduct	
Please make a partial payment from my BIRST account of \$ after tax (minimum \$2,000)		tax at a higher rate if you do not quote your Tax File Number.	
Please pay the entire balance of my BIRST account		Payments from BIRST will generally need to be received within 12 months of termination	
Bank name:		to qualify as an employment termination	
BSB No: Account No:		payment. Payments made more than 12 months after termination will be taxed at	
Account name:		marginal tax rates.	
		Once completed this form can be	