NTG employee payroll deduction Form

This form is for Northern Territory Government (NTG) employees to arrange rent deductions from their wages. You will need to return the completed form to your Housing Officer. This completed form will then be sent onto your relevant payroll team. You are required to provide your AGS number on this form to ensure correct deduction.

Employee detai	ils							
NT Government AGS number								
NT Governmen	t Departm	ent						
Title	☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Othe			ther	Date of	Date of birth		/
Full name								
Residential/								
Community address								
Work phone				Mobile	Mobile			
Email				•				
Deduction requ	ıest							
TMS Group number				TMS Account number		mber		
☐ Commence new deduction ☐ Cease existing deduction				ıction	☐ Change e	xisting ded	uction	
Deduction description			Amoun	Amount		Frequency		
Rent / Maintenance levy			\$	\$		Fortnightly		
Rent arrears			\$	\$		Fortnightly		
Security deposit			\$	\$		Fortnightly		
Bond assistance			\$	\$		Fortnightly		
Ceased accounts			\$	\$		Fortnightly		
Excess water			\$	\$		Fortnightly		
Maintenance			\$	\$		Fortnightly		



Deduction commencement							
Start date (choose one only)		☐ From my next available pay	☐ Future payment date				
If you selected a future payment date, provide start date			/	/			
Deduction description							
l,	I, (Full name)						
 Authorise the details in this form to be sent to my nominated employer on this form. Wish to commence my rent and/or any other deductions outlined in this form from my regular income. Understand my personal information will be treated in a confidential manner in accordance with the Information Privacy Principles at schedule two of the <i>Information Act 2002</i> (NT). Understand my information will only be disclosed between my employer, nominated on the front of this form, and the CEO (Housing). Can access and correct any information held about me. Can withdraw this deduction in writing at any time. 							
Signature			Date	/ /			
Employer processing instructions							

- Only one payment type should be processed per transaction.
- Transaction reference number should include the client's TMS account number on the front of this form. This number must be a seven digit number starting with 7.
- If you have any queries regarding this form, please contact the Department of Territory Families, Housing and Communities Finance Unit on (08) 8999 8888 or via email TFHC.bankingenquiries@nt.gov.au.

Declaration

Disclaimer

The CEO (Housing) collects only your personal information, which is necessary to provide housing assistance under the *Housing Act 1982* and its regulations. If you do not provide the requested information we may not be able to provide you with assistance. The information collected will not be disclosed to anyone without your consent unless it is required or authorised by law in accordance with the Information Privacy Principles at Schedule 2 of the *Information Act 2002* (NT). You have a right to access and correct the information held about you.

If you have any queries or concerns, please contact the Freedom of Information Department of Corporate and Digital Development on (08) 8999 1793, email FOl@nt.gov.au or write to PO Box 2391, Darwin NT 0801.

Office use only - Please circle relevant RM code below				
RM0617 (Remote Community Housing)	RM9065 (Public Housing)			
RM0615 (Government Employee Housing)	RM0011 (Address - Private Head Leasing)			
Private Head Leasing (Salary Sacrifice) NEPTER	Other, please identify RM code:			
Staff name	Staff contact number			
Date sent to payroll / /	Date sent to employer / /			
TRM number				