



## Automotive Lease Packaging

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Web: [www.1alp.com.au](http://www.1alp.com.au)

## FLEET MANAGEMENT VEHICLE EXPENSES CLAIM FORM

Please complete this form for all REIMBURSEMENT & DIRECT PAYMENT requests

Name: \_\_\_\_\_ Rego: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_

### Registration, CTP and Insurance – Please fill in the details and choose one option

Comprehensive Insurance	\$ _____	Pay Supplier Direct	<input type="checkbox"/>	Reimburse me	<input type="checkbox"/>
Registration	\$ _____	Pay Supplier Direct	<input type="checkbox"/>	Reimburse me	<input type="checkbox"/>
CTP Insurance (NSW only)	\$ _____	Pay Supplier Direct	<input type="checkbox"/>	Reimburse me	<input type="checkbox"/>
Auto Club Membership	\$ _____	Pay Supplier Direct	<input type="checkbox"/>	Reimburse me	<input type="checkbox"/>

Please send a **COPY** of your registration/insurance forms when requesting a direct payment/reimbursement.

It is your responsibility that your vehicle is registered and comprehensively insured at all times. Please allow 10 working days if you wish your registration or comprehensive insurance to be paid by Automotive Lease Packaging, an email confirmation will be sent to you once the payment has been made. **DO NOT SEND ORIGINAL INVOICES**

### Monthly Insurance Reimbursement – Please fill in details

Monthly Insurance Instalment \$ \_\_\_\_\_

For monthly insurance reimbursements, please provide a copy of the insurance payment schedule and a copy of the transaction coming out of your bank account. Monthly reimbursements are processed between 7 – 10<sup>th</sup> of every month.

### Fuel and other running expenses – Please fill in details

Fuel	\$ _____	Maintenance/Service	\$ _____
Tyres	\$ _____	Other Vehicle Expenses	\$ _____

Please attach substantiation in form of a receipt or tax invoice, when submitting a claim for the expenses above. EFTPOS receipts will not be accepted as Tax Invoices.

Please complete and **POST/FAX** or **Email** this form to us  
**DO NOT SEND ORIGINAL INVOICES**

## Bank Account Details

Automotive Lease Packaging will pay for your reimbursement to your nominated bank account. If you have sent your details to us before and they have not changed, you do not need to supply them below.

BSB: \_\_\_\_\_ Account Number: \_\_\_\_\_ Account Name: \_\_\_\_\_

*If you do not supply us with your bank account details we will not be able to reimburse you. We are unable to reimburse expenses into a credit card account.*

## Terms & Conditions

Please read these terms and conditions before completing and submitting a Fleet Management Vehicle Expenses Claim Form to Automotive Lease Packaging Pty Ltd.

- Payments will be made subject to sufficient funds sitting in your fleet management account.
- For each salary packaging expense included on your claim you must provide a payment description, date of payment and the payment amount (incl. GST) in the form of Tax Invoice (and a receipt if claiming a reimbursement)
- Claims will be reimbursed by way of Electronic Fund Transfer (EFT) to your nominated bank account. If you wish to change your bank account details, please provide Automotive Lease Packaging with your new bank account details.
- Automotive Lease Packaging will make payment to your nominated bank account within 10 business days of receipt of a claim form, subject to available funds.
- Where you have regular payments made from your salary packaging for benefits such as lease payments then these payments will take precedence in relation to the reimbursement of claims.
- If you do not fully complete the Fleet Management Vehicle Expenses Claim Form, including providing appropriate substantiation then Automotive Lease Packaging may return your claim to you without payment.
- If you make a false claim for reimbursement the matter will be referred to your employer and you may be denied further access to salary packaging.
- Note that your bank may take up to a further four business days to enable you to access these funds from your account.
- These terms and conditions may be updated by Automotive Lease Packaging at any time and are available on our website or by contacting us directly.
- If you require any further information please contact Automotive Lease Packaging on 1300 309 343 or visit [www.1alp.com.au](http://www.1alp.com.au)

## Declaration

I declare that the expense(s) listed above totalling \$\_\_\_\_\_ dollars were incurred by me for this vehicle and that GST Input Tax Credit has not been claimed by an entity, including my employer. I authorise Automotive Lease Packaging to contact any provider to verify any information to process this claim and confirm this vehicle was fleet managed by Automotive Lease Packaging when these goods and/or services were provided.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please complete and **POST/FAX** or **Email** this form to us  
**DO NOT SEND ORIGINAL INVOICES**