

PDFJob

HEADER PAGE

CLIENT: CGU
APPLICATION: Fargo
FILE: cguf0433.pdf
CREATED DATE: Mon 20/01/2014 17:31:01
STREAM: Mail Stream nor_dlx

IMPRESSIONS: 38
SHEETS: 19
CHECKPOINTS: 5
MAIL PACKS: 5

First checkpoint: 08975-00001

J M ALLEN
109 KANGAROO GROUND RD
WATTLE GLEN VIC 3096

Last checkpoint: 08975-00006

KAREN FORD
6 PARK STREET
TRENTHAM VIC 3458





CGU Workers Compensation

GPO Box 9960 Sydney NSW 2001
t 1300 666 506 www.cgu.com.au
Policy f (02) 9088 9709 Claims f (02) 9088 9707

125/1

STEVEN OUZMAN
J & O BRICKLAYING PTY LTD
40 Botany Street
BONDI JUNCTION NSW 2022

February 6, 2013

Dear Mr Ouzman

Renewal of your NSW Workers Compensation Policy

Employer Name J & O BRICKLAYING PTY LTD
Policy Number WGB110610250122
Employer Code JOBRICK
ACN 146553095
Business Address As per mailing address

Thank you for submitting your Declaration of Estimated Wages.

Based on the information provided, your estimate premium for the period of insurance **29/01/2013-29/01/2014** has been calculated.

Please refer to the premium calculation, invoice and statement provided with this letter for further information.

Should you have any queries please contact our office for assistance.

Yours Faithfully,

VICTORIA FONG
UNDERWRITING OFFICER
02 9082 4415



000002/08975-00001

WORKERS COMPENSATION ACT 1987

SMALL EMPLOYER RENEWAL PREMIUM CALCULATION

Commencement or renewal premium calculation form for small employers.
(Employers with a basic tariff premium of less than or equal to \$10,000
or wages less than or equal to \$300,000)

1. EMPLOYER'S DETAILS

Legal Name of Employer

J & O BRICKLAYING PTY LTD

Trading Name

Location Address

40 Botany Street

Suburb

BONDI JUNCTION

Postcode

2 0 2 2

ABN of Employer or Trustee

9 2 1 4 6 5 5 3 0 9 5

Declared input tax credit entitlement

1 0 0 %

ACN/ARBN

0 0 1 4 6 5 5 3 0 9 5

Policy period

2 9 / 0 1 / 1 3 to 2 9 / 0 1 / 1 4

Policy Number

W G B 1 1 0 6 1 0 2 5 0 1 2 2

Your estimated premium for the policy period

\$ 2 4 , 2 7 1 . 9 0

Premium = T + Q - Y + D - I + M - A

THIS DOCUMENT IS NOT A TAX INVOICE FOR THE PURPOSES OF GST



2. PREMIUM CALCULATION

(If your policy has both wages and per capita classifications, T equals the sum of the basic tariff premium for both categories)

Basic tariff premium (T)

\$23,563.50

Dust diseases levy (D)

\$708.40

Total premium

\$24,271.90

T = Basic tariff premium, calculated by multiplying the wages by the percentage premium rate of the applicable WorkCover Industry Classification (WIC).

Components used for calculation of basic tariff premium

WorkCover Industry Classification number	WorkCover Industry Classification description	Wages (W)	Tariff rate (R)	Basic tariff premium
422200	Bricklaying Services	\$230,000.00	10.2450%	\$23,563.50
			Total	\$23,563.50

D = Dust diseases levy, calculated in accordance with section 6 of the Workers Compensation (Dust Diseases) Act 1942 by multiplying the wages by the applicable dust diseases rate.

Components used for calculation of dust diseases levy

WorkCover Industry Classification number	WorkCover Industry Classification description	Dust diseases rate	Wages	Contribution
422200	Bricklaying Services	0.3080%	\$230,000.00	\$708.40
			Total	\$708.40



TAX INVOICE

This document will be a tax invoice for GST purposes when you make a payment

Steven Ouzman
J & O BRICKLAYING PTY LTD
40 Botany Street
BONDI JUNCTION 2022

Date Issued	05/02/2013
Total Payable (If paid in full by 05/03/2013)	\$23,543.74
Total Payable (If not paid in full by 05/03/2013)	\$24,271.90

Employer Name: J & O BRICKLAYING PTY LTD
Policy No: WGB110610250122
Policy Period: 29/01/2013 – 29/01/2014

PAYMENT SCHEDULE

PAYMENT DESCRIPTION	AMOUNT PAYABLE	GST	DUE DATE	INVOICE NO.	PAID?
First Quarterly Instalment	\$5,600.22	\$509.11	28/02/2013	12061560	✓
Second Quarterly Instalment	\$6,535.73	\$594.16	29/05/2013	12061561	
Third Quarterly Instalment	\$6,067.98	\$551.63	29/08/2013	12061562	
Final Quarterly Instalment	\$6,067.97	\$551.63	29/11/2013	12061563	

You can set up automatic Direct debit payments from your nominated account. Just log into www.cgu.com.au/WorkersCompensation.Live, follow the renewal link and go to the payment options to submit your account details

Please note:

- We will issue courtesy reminder notices by email, fax or post. We understand that there will be instances where, for reasons beyond our control, a notice may not reach you. Please refer to this payment schedule as a reminder of when your instalments are due.
- If we do not receive your Instalments by the due date, legislative obligations will require you to pay your premium as a lump sum.
- A discount of 3%, calculated on your initial premium, will be applied if you pay all the above instalments prior to 05/03/2013.
- Payments received after the due date may incur a late payment fee of .977% per month, compounding monthly.
- If you are registered for GST purposes, your input tax credit entitlement is, or is based upon, the GST amount shown above.
- In accordance with the GST law for insurance premiums, the GST amount may be less than 1/11th of the total payable amount.
- This schedule replaces any previous schedules issued.



PREFERRED METHODS OF PAYMENT



BPAY®

Biller Code:	566273
Cust Ref:	106540198

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--

DIRECT DEBIT

DD

Direct Debit is available when paying by instalments. Your completed forms can be faxed to (02) 9088 9709, or alternatively, posted to: GPO Box 9960, Sydney NSW 2001



GPO Box 9960
Sydney NSW 2001

Telephone 1300 666 506
Facsimile (02) 9088 9709

J & O BRICKLAYING PTY LTD
40 Botany Street
BONDI JUNCTION NSW 2022

Policy Number : WGB110610250122

Payment Due Now : \$0.00

Not Yet Due

Policy Year	Invoice	Transaction Description	Debits	Credits	Due Date
29/01/2013	12061561	Second Quarterly Instalment	\$6,535.73		29/05/2013
29/01/2013	12061562	Third Quarterly Instalment	\$6,067.98		29/08/2013
29/01/2013	12061563	Fourth Quarterly Instalment	\$6,067.97		29/11/2013

Total Not Yet Due : \$18,671.68

Account Balance (Including GST) : \$18,671.68

Payments received after the due date may incur a late payment fee, compounded monthly, at the applicable rate.

There may be additional costs incurred that are not shown on this statement.

For more information please contact our office.

Please disregard this notice if you have recently paid this account.



PREFERRED METHODS OF PAYMENT



Biller Code: 566273
Cust Ref: 106540198

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Sydney, NSW, 2001.



CGU Workers Compensation

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BRIAN WEAL
DWJ TRANSPORT PTY LIMITED
PO Box 684
BATHURST NSW 2795

002/2

February 6, 2013

Dear Sir/Madam

Adjustment to your NSW Workers Compensation Premium

Employer Name DWJ TRANSPORT PTY LIMITED
Trading Name DWJ TRANSPORT PTY LTD
Policy Number WGB110108572122
Employer Code 62081685
ACN 148826439
Business Address 503 Anson Street
ORANGE 2800

Thank you for submitting your Declaration of Actual Wages.

Based on the information provided, your actual premium for the period of insurance **31/01/2012-31/01/2013** has been calculated and as a result an adjustment has been generated.

Please refer to the premium calculation, invoice and statement provided with this letter for further information.

Should you have any queries please contact our office for assistance.

Yours Faithfully,

YANG YANG
UNDERWRITING OFFICER
02 9082 4413



000006/08975-00003

WORKERS COMPENSATION ACT 1987

SMALL EMPLOYER ADJUSTMENT PREMIUM CALCULATION

Adjustment premium calculation form for small employers.
(Employers with a basic tariff premium of less than or equal to \$10,000
or wages less than or equal to \$300,000)

1. EMPLOYER'S DETAILS

Legal Name of Employer

DWJ TRANSPORT PTY LIMITED

Trading Name

DWJ TRANSPORT PTY LTD

Location Address

503 Anson Street

Suburb

ORANGE

Postcode

2 8 0 0

ABN of Employer or Trustee

1 1 1 4 8 8 2 6 4 3 9

Declared input tax credit entitlement

1 0 0 %

ACN/ARBN

0 0 1 4 8 8 2 6 4 3 9

Policy period

3 1 / 0 1 / 1 2 to 3 1 / 0 1 / 1 3

Policy Number

W G B 1 1 0 1 0 8 5 7 2 1 2 2

Final premium for the policy period

\$ 1 4 , 9 3 4 . 9 2

Your estimated premium for the policy period was

\$ 1 9 , 7 3 1 . 0 0

Your estimated premium was calculated using wages of

\$ 3 0 0 , 0 0 0 . 0 0

Premium = T + Q - Y + D - I + M - A

THIS DOCUMENT IS NOT A TAX INVOICE FOR THE PURPOSES OF GST

2. PREMIUM CALCULATION

(If your policy has both wages and per capita classifications, T equals the sum of the basic tariff premium for both categories)

Basic tariff premium (T)

\$14,821.38

Dust diseases levy (D)

\$113.54

Total premium

\$14,934.92

T = Basic tariff premium, calculated by multiplying the wages by the percentage premium rate of the applicable WorkCover Industry Classification (WIC).

Components used for calculation of basic tariff premium

WorkCover Industry Classification number	WorkCover Industry Classification description	Wages (W)	Tariff rate (R)	Basic tariff premium
611010	Road Frght T/sport- Bulk Frght	\$227,078.00	6.5270%	\$14,821.38
			Total	\$14,821.38

D = Dust diseases levy, calculated in accordance with section 6 of the Workers Compensation (Dust Diseases) Act 1942 by multiplying the wages by the applicable dust diseases rate.

Components used for calculation of dust diseases levy

WorkCover Industry Classification number	WorkCover Industry Classification description	Dust diseases rate	Wages	Contribution
611010	Road Frght T/sport- Bulk Frght	0.0500%	\$227,078.00	\$113.54
			Total	\$113.54



TAX INVOICE

This document will be a tax invoice for GST purposes when you make a payment

Brian Weal
DWJ TRANSPORT PTY LIMITED
T/as DWJ TRANSPORT PTY LTD
PO Box 684
BATHURST 2795

Date Issued 05/02/2013

Invoice Number 12061795

Total Credit \$4,796.08

No Payment Required

Employer Name: DWJ TRANSPORT PTY LIMITED
Policy No: WGB110108572122
Policy Period: 31/01/2012 – 31/01/2013

PAYMENT DESCRIPTION	PREMIUM	GST	AMOUNT
Actual Premium Credit	\$4,360.07	\$436.01	\$4,796.08

Your adjustment has resulted in a credit. This amount will be offset towards the outstanding amounts on the attached statement.

Any remaining balance will be issued to you within 30 days.

Please note:

- If you are registered for GST purposes, your input tax credit entitlement is, or is based upon, the GST amount shown above.
- In accordance with the GST law for insurance premiums, the GST amount may be less than 1/11th of the total payable amount.



PREFERRED METHODS OF PAYMENT



BPAY®

Biller Code:	566273
Cust Ref:	106521586

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GPO Box 9960
Sydney NSW 2001

Telephone 1300 666 506
Facsimile (02) 9088 9709

DWJ TRANSPORT PTY LIMITED
T/as DWJ TRANSPORT PTY LTD
PO Box 684
BATHURST NSW 2795

Policy Number : WGB110108572122

Payment Due Now : \$0.00

Current

Policy Year	Invoice	Transaction Description	Debits	Credits	Due Date
31/01/2012	12061795	Premium Adjustment Credit		\$4,796.08	05/02/2013

Total Payable Now : \$0.00

Account Balance (Including GST) : \$4,796.08 (Credit)



000009/08975-00003



CGU Workers Compensation

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007/3

MARTIN SHORT

CONNECTION CREEK PASTORAL CO PTY LTD
Level 1, 100 Cumberland Street
THE ROCKS NSW 2000

February 6, 2013

Dear Sir/Madam

Adjustment to your NSW Workers Compensation Premium

Employer Name	CONNECTION CREEK PASTORAL CO PTY LTD
Policy Number	WGB110208848122
Employer Code	62171879
ACN	107804946
Business Address	680 Maria River Road CRESCENT HEAD 2440

Thank you for submitting your Declaration of Actual Wages.

Based on the information provided, your actual premium for the period of insurance **03/02/2012-03/02/2013** has been calculated and as a result an adjustment has been generated.

Please refer to the premium calculation, invoice and statement provided with this letter for further information.

Should you have any queries please contact our office for assistance.

Yours Faithfully,

YANG YANG
UNDERWRITING OFFICER
02 9082 4413



000010/08975-00004

WORKERS COMPENSATION ACT 1987

SMALL EMPLOYER ADJUSTMENT PREMIUM CALCULATION

Adjustment premium calculation form for small employers.
(Employers with a basic tariff premium of less than or equal to \$10,000
or wages less than or equal to \$300,000)

1. EMPLOYER'S DETAILS

Legal Name of Employer

CONNECTION CREEK PASTORAL CO PTY LTD

Trading Name

Location Address

680 Maria River Road

Suburb

CRESCENT HEAD

Postcode

2 4 4 0

ABN of Employer or Trustee

5 1 1 0 7 8 0 4 9 4 6

Declared input tax credit entitlement

1 0 0 %

ACN/ARBN

0 0 1 0 7 8 0 4 9 4 6

Policy period

0 3 / 0 2 / 1 2 to 0 3 / 0 2 / 1 3

Policy Number

W G B 1 1 0 2 0 8 8 4 8 1 2 2

Final premium for the policy period

\$ 6 0 4 . 4 0

Your estimated premium for the policy period was

\$ 3 , 6 0 3 . 4 8

Your estimated premium was calculated using wages of

\$ 4 9 , 3 8 9 . 8 2

Premium = T + Q - Y + D - I + M - A

THIS DOCUMENT IS NOT A TAX INVOICE FOR THE PURPOSES OF GST



2. PREMIUM CALCULATION

(If your policy has both wages and per capita classifications, T equals the sum of the basic tariff premium for both categories)

Basic tariff premium (T)

\$602.33

Dust diseases levy (D)

\$2.07

Total premium

\$604.40

T = Basic tariff premium, calculated by multiplying the wages by the percentage premium rate of the applicable WorkCover Industry Classification (WIC).

Components used for calculation of basic tariff premium

WorkCover Industry Classification number	WorkCover Industry Classification description	Wages (W)	Tariff rate (R)	Basic tariff premium
12300	Sheep-Beef Cattle Farming	\$8,284.02	7.2710%	\$602.33
			Total	\$602.33

D = Dust diseases levy, calculated in accordance with section 6 of the Workers Compensation (Dust Diseases) Act 1942 by multiplying the wages by the applicable dust diseases rate.

Components used for calculation of dust diseases levy

WorkCover Industry Classification number	WorkCover Industry Classification description	Dust diseases rate	Wages	Contribution
12300	Sheep-Beef Cattle Farming	0.0250%	\$8,284.02	\$2.07
			Total	\$2.07



TAX INVOICE

This document will be a tax invoice for GST purposes when you make a payment

Martin Short
CONNECTION CREEK PASTORAL CO PTY LTD
Level 1, 100 Cumberland Street
THE ROCKS 2000

Date Issued 05/02/2013

Invoice Number 12061303

Total Credit \$2,999.08

No Payment Required

Employer Name: CONNECTION CREEK PASTORAL CO PTY LTD
Policy No: WGB110208848122
Policy Period: 03/02/2012 – 03/02/2013

PAYMENT DESCRIPTION	PREMIUM	GST	AMOUNT
Actual Premium Credit	\$2,726.44	\$272.64	\$2,999.08

Your adjustment has resulted in a credit. This amount will be offset towards the outstanding amounts on the attached statement.

Any remaining balance will be issued to you within 30 days.

Please note:

- If you are registered for GST purposes, your input tax credit entitlement is, or is based upon, the GST amount shown above.
- In accordance with the GST law for insurance premiums, the GST amount may be less than 1/11th of the total payable amount.



PREFERRED METHODS OF PAYMENT



BPAY®

Biller Code:	566273
Cust Ref:	106524622

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DIRECT DEBIT

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GPO Box 9960
Sydney NSW 2001

Telephone 1300 666 506
Facsimile (02) 9088 9709

CONNECTION CREEK PASTORAL CO PTY LTD
Level 1, 100 Cumberland Street
THE ROCKS NSW 2000

Policy Number : WGB110208848122

Payment Due Now : \$0.00

Current

Policy Year	Invoice	Transaction Description	Debits	Credits	Due Date
03/02/2012	12061303	Premium Adjustment Credit		\$2,999.08	05/02/2013

Total Payable Now : \$0.00

Account Balance (Including GST) : \$2,999.08 (Credit)



000013/08975-00004



CGU Workers Compensation

GPO Box 9960 Sydney NSW 2001
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015/4

ZHI QIANG SUN & JAI JAI XU
41A Belmore Street
OATLANDS NSW 2117

February 6, 2013

Dear Sir/Madam

PAYMENT OF WORKERS COMPENSATION INSTALMENT

Employer Name ZHI QIANG SUN & JAI JAI XU
Trading Name IGA OATLANDS
Policy Number WGB110610531122
Employer Code 62863426
Broker Name MCI INSURANCE BROKERS PTY LTD
Period Of Insurance 29/06/2012 to 29/06/2013

It appears we have not received your payment for your Quarterly Instalment of \$328.58 which was due 29/01/2013. As a result the Schedule of Instalments has been withdrawn and the option to pay by instalments is no longer available. The balance of premium is now due.

Premiums not paid within time are subject to the accrual of late payment fees. To avoid this accrual please pay the balance of outstanding premium as shown on the attached statement, in full, immediately.

Your tax invoice is also attached for your records.

Should you have any queries or have any difficulties making this payment please contact our office for assistance.

Yours Faithfully,

CGU Workers Compensation (NSW) Limited



000014/08975-00005

CGU Workers Compensation (NSW) Limited
Agent for the NSW WorkCover Scheme
ABN 83 564 379 108/007



GPO Box 9960
Sydney NSW 2001

Telephone 1300 666 506
Facsimile (02) 9088 9709

TAX INVOICE

This document will be a tax invoice for GST purposes when you make a payment

ZHI QIANG SUN & JAI JAI XU
T/as IGA OATLANDS
41A Belmore Street
OATLANDS 2117

Date Issued 05/02/2013

Invoice Number 12061590

Total Payable \$657.15

Due Date 29/01/2013

Employer Name: ZHI QIANG SUN & JAI JAI XU
Policy No: WGB110610531122
Policy Period: 29/06/2012 – 29/06/2013

PAYMENT DESCRIPTION	PREMIUM	GST	AMOUNT
Revoked Instalment	\$597.41	\$59.74	\$657.15

Please note:

- Payments received after the due date may incur a late payment fee of 1.018% per month, compounding monthly.
- If you are registered for GST purposes, your input tax credit entitlement is, or is based upon, the GST amount shown above.
- In accordance with the GST law for insurance premiums, the GST amount may be less than 1/11th of the total payable amount.

x



000015/08975-00005

PREFERRED METHODS OF PAYMENT



BPAY®

Biller Code:	566273
Cust Ref:	106543382

Telephone & Internet Banking – BPAY® Contact your bank, credit union or building society to make this payment from your cheque or savings account. More info: www.bpay.com.au
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DIRECT DEBIT

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GPO Box 9960
Sydney NSW 2001

Telephone 1300 666 506
Facsimile (02) 9088 9709

ZHI QIANG SUN & JAI JAI XU
T/as IGA OATLANDS
41A Belmore Street
OATLANDS NSW 2117

Policy Number : WGB110610531122

Payment Due Now : \$660.49

Current

Policy Year	Invoice	Transaction Description	Debits	Credits	Due Date
29/06/2012	5371937/I	Late Payment Fee	\$3.34		31/01/2013
29/06/2012	12061590	Revoked Instalment	\$657.15		29/01/2013

Total Payable Now : \$660.49

Account Balance (Including GST) : \$660.49

Payments received after the due date may incur a late payment fee, compounded monthly, at the applicable rate.

There may be additional costs incurred that are not shown on this statement.

For more information please contact our office.

Please disregard this notice if you have recently paid this account.



PREFERRED METHODS OF PAYMENT



Biller Code: 566273
Cust Ref: 106543382

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DD

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posted to : GPO Box 9960,
Sydney, NSW, 2001.



CGU Workers Compensation

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t 1300 666 506 www.cgu.com.au
Policy f (02) 9088 9709 Claims f (02) 9088 9707



034/5

PETER CHENEY
CHENEY CIVIL PTY LTD
Unit 302, 110 James Ruse Drive
ROSEHILL NSW 2142

February 6, 2013

Dear Sir/Madam

Adjustment to your NSW Workers Compensation Premium

Employer Name CHENEY CIVIL PTY LTD
Policy Number WGB991108527122
Employer Code CHENEY
ACN 089993475
Business Address As per mailing address

Thank you for submitting your Declaration of Actual Wages.

Based on the information provided, your actual premium for the period of insurance **17/12/2011-17/12/2012** has been calculated and as a result an adjustment has been generated.

Please refer to the premium calculation, invoice and statement provided with this letter for further information.

Should you have any queries please contact our office for assistance.

Yours Faithfully,

YANG YANG
UNDERWRITING OFFICER
02 9082 4413



000017/08975-00006

WORKERS COMPENSATION ACT 1987

SMALL EMPLOYER ADJUSTMENT PREMIUM CALCULATION

Adjustment premium calculation form for small employers.
(Employers with a basic tariff premium of less than or equal to \$10,000
or wages less than or equal to \$300,000)

1. EMPLOYER'S DETAILS

Legal Name of Employer

CHENEY CIVIL PTY LTD

Trading Name

Location Address

Unit 302, 110 James Ruse Drive

Suburb

ROSEHILL

Postcode

2 1 4 2

ABN of Employer or Trustee

3 7 0 8 9 9 9 3 4 7 5

Declared input tax credit entitlement

1 0 0 %

ACN/ARBN

0 0 0 8 9 9 9 3 4 7 5

Policy period

1 7 / 1 2 / 1 1 to 1 7 / 1 2 / 1 2

Policy Number

W G B 9 9 1 1 0 8 5 2 7 1 2 2

Final premium for the policy period

\$ 4 , 1 1 7 . 0 5

Your estimated premium for the policy period was

\$ 2 , 9 9 5 . 2 9

Your estimated premium was calculated using wages of

\$ 6 9 , 0 0 0 . 0 0

Premium = T + Q - Y + D - I + M - A

THIS DOCUMENT IS NOT A TAX INVOICE FOR THE PURPOSES OF GST

2. PREMIUM CALCULATION

(If your policy has both wages and per capita classifications, T equals the sum of the basic tariff premium for both categories)

Basic tariff premium (T)

\$4,069.63

Dust diseases levy (D)

\$47.42

Total premium

\$4,117.05

T = Basic tariff premium, calculated by multiplying the wages by the percentage premium rate of the applicable WorkCover Industry Classification (WIC).

Components used for calculation of basic tariff premium

WorkCover Industry Classification number	WorkCover Industry Classification description	Wages (W)	Tariff rate (R)	Basic tariff premium
412100	Road and Bridge Construction	\$94,841.00	4.2910%	\$4,069.63
			Total	\$4,069.63

D = Dust diseases levy, calculated in accordance with section 6 of the Workers Compensation (Dust Diseases) Act 1942 by multiplying the wages by the applicable dust diseases rate.

Components used for calculation of dust diseases levy

WorkCover Industry Classification number	WorkCover Industry Classification description	Dust diseases rate	Wages	Contribution
412100	Road and Bridge Construction	0.0500%	\$94,841.00	\$47.42
			Total	\$47.42



TAX INVOICE

This document will be a tax invoice for GST purposes when you make a payment

Peter Cheney
CHENEY CIVIL PTY LTD
Unit 302, 110 James Ruse Drive
ROSEHILL 2142

Date Issued 05/02/2013

Invoice Number 12061249

Total Payable \$1,121.76

Due Date 05/03/2013

Employer Name: CHENEY CIVIL PTY LTD
Policy No: WGB991108527122
Policy Period: 17/12/2011 – 17/12/2012

PAYMENT DESCRIPTION	PREMIUM	GST	AMOUNT
Actual Premium	\$1,019.78	\$101.98	\$1,121.76

Please note:

- Payments received after the due date may incur a late payment fee of 1.018% per month, compounding monthly.
- If you are registered for GST purposes, your input tax credit entitlement is, or is based upon, the GST amount shown above.
- In accordance with the GST law for insurance premiums, the GST amount may be less than 1/11th of the total payable amount.



PREFERRED METHODS OF PAYMENT



BPAY®

Biller Code: 566273
Cust Ref: 106032022

Telephone & Internet Banking – BPAY®
Contact your bank, credit union or building society to make this payment from your cheque or savings account. More info: www.bpay.com.au

DIRECT DEBIT

DD

Direct Debit is available when paying by instalments. Your completed forms can be faxed to (02) 9088 9709, or alternatively, posted to: GPO Box 9960, Sydney NSW 2001



GPO Box 9960
Sydney NSW 2001

Telephone 1300 666 506
Facsimile (02) 9088 9709

CHENEY CIVIL PTY LTD
Unit 302, 110 James Ruse Drive
ROSEHILL NSW 2142

Policy Number : WGB991108527122

Payment Due Now : \$1,121.76

Current

Policy Year	Invoice	Transaction Description	Debits	Credits	Due Date
17/12/2011	12061249	Premium Adjustment	\$1,121.76		05/03/2013

Total Payable Now : \$1,121.76

Not Yet Due

Policy Year	Invoice	Transaction Description	Debits	Credits	Due Date
17/12/2012	12060922	Second Quarterly Instalment	\$1,311.86		17/04/2013
17/12/2012	12060923	Third Quarterly Instalment	\$1,030.34		17/07/2013
17/12/2012	12060924	Fourth Quarterly Instalment	\$1,030.34		17/10/2013

Total Not Yet Due : \$3,372.54

Account Balance (Including GST) : \$4,494.30

Payments received after the due date may incur a late payment fee, compounded monthly, at the applicable rate.

There may be additional costs incurred that are not shown on this statement.

For more information please contact our office.

Please disregard this notice if you have recently paid this account.



PREFERRED METHODS OF PAYMENT



Biller Code: 566273
Cust Ref: 106032022

Telephone & Internet Banking – BPAY®
Contact your bank, credit union or building society
to make this payment from your cheque or
savings account.
More info: www.bpay.com.au

DD

DIRECT DEBIT

Direct Debit is available when
paying by instalments. Your
completed forms can be faxed to
(02) 9088 9709, or alternatively,
posted to : GPO Box 9960,
Sydney, NSW, 2001.

PDFJob

TRAILER PAGE

CLIENT: CGU
APPLICATION: Fargo
FILE: cguf0433.pdf
CREATED DATE: Mon 20/01/2014 17:31:01
STREAM: Mail Stream nor_dlx

IMPRESSIONS: 38
SHEETS: 19
CHECKPOINTS: 5
MAIL PACKS: 5

First checkpoint: 08975-00001

J M ALLEN
109 KANGAROO GROUND RD
WATTLE GLEN VIC 3096

Last checkpoint: 08975-00006

KAREN FORD
6 PARK STREET
TRENTHAM VIC 3458

