

## **Jobkeeper - Enrolment & Declaration**

### Applicant Information Schedule

Employer Name

ABN

In which month did the business experience the min.  
30% reduction in turnover?

#### Number of eligible employees: (if applicable)

First Fortnight (30th March - 12th April)  record no. of employees

Second Fortnight (13th April - 27th April)  record no. of employees

Eligible Business Participant: (if applicable)  record 1 (only if applicable)

*(eg. Sole trader/Partner/Trust Beneficiary)*

Provide bank account details below, or we will use existing bank account records.

Bank Account Name

*(if different to above)*

BSB

Account Number

### **Declaration & Confirmation**

1. My business is eligible for the Jobkeeper program.
2. The number of employees (or eligible business participant) listed above are eligible for the Jobkeeper program and I have retained Jobkeeper Employee Nomination Notices for each of the employees.
3. I/We will advise Michael Beks & Associates of any change to the eligibility of any employee or eligible business participant during the operation of the program.
4. All of the information provided to Michael Beks & Associates for the eligibility, enrolment and application for the Jobkeeper program is true and correct and can be substantiated by business records maintained.
5. Michael Beks & Associates is authorised to enrol my business for the Jobkeeper program, apply for Jobkeeper payments and to lodge monthly Jobkeeper reports using ATO online services on my behalf.
6. I/We acknowledge that the ATO may issue fines or penalties if any of the information is incorrect and may require the repayment of Jobkeeper amounts paid.

Signed

Name

Dated