

Notification of Australian Business Number and reference identification for tax treatment purposes and Recipient Created Tax Invoice agreement

Important information

You must have an Australian Business Number (ABN) to enter into a Recipient Created Tax Invoice (RCTI) agreement with the Australian Government Department of Human Services.

Purpose of this form

If you receive or may receive payments from the Australian Government Department of Human Services that are subject to Goods and Services Tax (GST), you must comply with the requirements of the GST legislation by:

- entering into a RCTI agreement with the Department of Human Services, **and**
- providing the Australian Business Number (ABN) of the enterprise, **and**
- advising the Department of Human Services if your ABN reference identification (ID) details change.

By completing this form, you are entering into an agreement with the Department of Human Services.

For more information

For more information, go to our website humanservices.gov.au/healthprofessionals or call **1800 653 629** Monday to Friday, between 9.00 am and 5.00 pm, Australian Eastern Standard Time.

Note: Call charges apply – calls from mobile phones may be charged at a higher rate.

Filling in this form

- **Please use black or blue pen**
- Print in BLOCK LETTERS
- Mark boxes like this with a ✓ or ✗

Returning your form

Check that you have answered all the questions you need to answer and that you have signed and dated this form.

Scan and email the completed application and certified document(s) to ABN.RCTI.notifications@humanservices.gov.au

or Fax: **1800 069 288**

or Post to:

Department of Human Services
GST Programme
GPO Box 2956
ADELAIDE SA 5001

Contact person's details

The contact person is the person who is authorised to discuss details about this form. The contact person must be authorised by the owner(s) of the organisation to advise the Department of Human Services of changes. All correspondence will be addressed to the contact person.

1 Dr Mr Mrs Miss Ms Other

Family name

First given name

2 Postal address

Postcode

3 Daytime phone number

Mobile phone number

Fax number

Email

@

4 Position held

Taxation status

You must have an ABN to enter into a RCTI agreement with the Department of Human Services.

5 Australian Business Number (ABN)

ABN branch registration number, if applicable

6 Business/trading name under which the ABN is registered

7 ABN registration date as advised by the Australian Taxation Office (ATO)

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8 Are you registered for GST?

If you are not registered for GST, you may not enter into an RCTI agreement.

No

Yes Start date

/ /

Department of Human Services reference ID

Provide ONLY those Department of Human Services reference IDs that are to be linked to your ABN.

9 Provider number(s)

Grid for provider numbers

10 Pharmacy approval number(s)

Grid for pharmacy approval numbers

11 Other Department of Human Services reference ID(s)

Grid for other reference IDs



If you need more space, attach a separate sheet.

Notification dates

12 Date for the Department of Human Services reference ID(s) to be linked to the ABN provided at question 5.

Start date when you want the payments to commence

/ /

End date (if applicable)

/ /

Recipient Created Tax Invoice Agreement

13 What is a Recipient Created Tax Invoice (RCTI) Agreement?

The legislation allows the Department of Human Services, as the receiver of the services, to take responsibility for issuing a tax invoice on behalf of those that receive payments from us. The RCTI agreement authorises the Department of Human Services, on behalf of the payee to issue RCTIs. A person authorised to sign on behalf of the payee should sign the RCTI agreement.

The Department of Human Services recommends that all organisations enter into an RCTI agreement with us.

Please read the conditions of the agreement below.

Conditions of the agreement

- a. The Department of Human Services will issue RCTIs for payments in respect of all taxable supplies made by you to the Department of Human Services.

- b. You must not issue any tax invoices in respect of those supplies.
- c. You must be registered for GST at the time of signing the RCTI agreement and have notified the Department of Human Services of your ABN in the space provided on this form.
- d. You must notify the Department of Human Services immediately if you cease to be registered for GST or you become aware that your registration may be cancelled.
- e. The Department of Human Services is registered for GST. The ABN for the Department of Human Services is 75 174 030 967.
- f. The Department of Human Services must notify you immediately if it ceases to be registered for GST or becomes aware that its registration may be cancelled or if it ceases to satisfy any of the requirements of public ruling GSTR 2000/10 or its successors.
- g. By signing below, you warrant that you are properly authorised to agree to the terms of this agreement for the ABN specified by you at question 5.

Name

Text box for name

Signature

Text box for signature with pen icon

Date

/ /

Privacy notice

14 Your personal information is protected by law, including the *Privacy Act 1988*, and is collected by the Australian Government Department of Human Services for the assessment and administration of payments and services. This information is required to process your application or claim.

Your information may be used by the department or given to other parties for the purposes of research, investigation or where you have agreed or it is required or authorised by law.

You can get more information about the way in which the Department of Human Services will manage your personal information, including our privacy policy, at humanservices.gov.au/privacy or by requesting a copy from the department.

Declaration

15 I declare that:

- the information I have provided in this form is complete and correct.
- I am the authorised contact person in question 1.

I understand that:

- I have to advise the Australian Government Department of Human Services of any changes.
- the payment will not take effect until the form is processed.
- giving false or misleading information is a serious offence.

Authorised contact person's name

Text box for name

Authorised contact person's signature

Text box for signature with pen icon

Date

/ /