

若您从本机构官网下载《服务行业计划雇主注册表格》，则需使用 **Adobe Acrobat Reader** 等软件（可免费下载），以电子方式填写 **PDF** 表格。我们推荐使用台式电脑来完成填写，而非手机。

若无法电子填报，则可将其打印，手动填写，并用表格结尾提供的方法之一将其交回本机构。

如需帮助，请致电 **02 6247 3900** 与本机构联络。



ACT Leave Services Industry Scheme Employer Registration

This form is to be completed only by Services Industry employers, registering for the Services Industry Scheme.

If you are a working director, sole trader or a partner in a partnership with no employees, [contact us](#) to discuss your options.

For help completing this form call 02 6247 3900.

Privacy – Information on this form is collected under the *Information Privacy Act 2014*. Before completing this form, you must read the ACT Leave privacy statement available at <https://actleave.act.gov.au/privacy-policy/>

Services Industry details

Type of work performed

企业业务简述

Employer details

Business name

Trading name(s)

Street address

State

Postcode

Postal address
(if different to above)

State

Postcode

Email

Contact phone number

企业商用名称

用于接收澳大利亚首都领地长期服务假管理机构（ACT Leave）的邮寄地址

Contact person's details

This person will be contacted regarding returns

Full name

Position in the organisation

Email

Contact phone number

Business details

Type of business:

Company ☐

Working Director with employees ☐

Partnership ☐

Sole trader ☐

Charity / Other ☐

Trust ☐

ABN

ACN

Registered office address

State

Postcode

Full name / Names of all partners

ABN

For a Trust, a scanned copy of the Trust Deed must be provided with this completed form.

仅当您在 ASIC 注册为“公司”时需提供澳大利亚公司编码（ACN）

发送法律和官方文件的官方地址。该地址须为实体街道地址，不可填写邮政信箱。

注册信托企业须提交信托契约副本。若无法找到契约副本，可咨询其他受托人、会计师或律师协助。

如需进一步帮助，请与我们联系。

Employer's declaration

I declare that:

- the information provided on this form is true and correct in every detail.
- I will notify ACT Leave in writing and provide full details if there is a change.

I acknowledge that:

- ACT Leave may refuse this application if the information provided is incomplete, false or misleading. An authorised officer may request further information to be provided.
- giving false or misleading information is a serious offence under section 338 of the *Criminal Code 2002*.
- I have read and agree to the ACT Leave privacy statement available at <https://actleave.act.gov.au/privacy-policy/>

此部分由表格填写人完成。

Employer's
signature

Date

Position

Return this form and all supporting documents:

- **online** – save the form and upload to the website following the instructions at <https://actleave.act.gov.au/forms>, or
- by email to: services@actleave.act.gov.au, or
- by post to: ACT Leave PO Box 264 Jamison Centre ACT 2614

Clear

Save

Print

点击此按钮清除表单并重新填写

点击此按钮将表单保存至您的设备

点击此按钮打印表单