



# **STEF'S TRANSPORT PTY LTD**

## Contractor Compliance Statement

<b>Revision History</b>	
Document Ref: <b>STMGM-12</b>	Revision: 3
Approval Date: February 2021	Approved By: General Manager

If you have any questions regarding the content of this document, please contact Stef's Transport Pty Ltd at 0418 258 895 or via email at [compliance@stefstransport.net.au](mailto:compliance@stefstransport.net.au)



**SUBCONTRACTOR / TOW OPERATOR**

*Stef's Transport requires some information about your business for safety and compliance purposes. Please return the completed checklist with completed copies of the acknowledgment of subcontractor manual, compliance statement, code of conduct and the relevant company documentation to [compliance@stefstransport.net.au](mailto:compliance@stefstransport.net.au)*

Trading Entity Name:			
ABN:		ACN:	
Trust Name:			
Business Name:			
Street Address:			
Postal Address:			
Telephone:		Mobile:	
Managing Director:		Email: Phone:	
Accounts Contact:		Email: Phone:	

**Business accreditation/certification details** (List of current accreditations, e.g. NHVAS, Quality Certification, TruckSafe)

Certification / Accreditation Organisation and Type	Certification / Accreditation number	Expiry date

**Vehicle / Licensing Details** (For additional vehicles and drivers, please see space later in the form)

**For all vehicles and drivers, please provide copies of:  
Roadworthy Certificate or Last Annual service records,  
Speed Limiter, Park Brake Alarm and Turntable Inspection Certificates  
The 2 most recent copies of vehicle service records.**

Prime Mover Make			
Registration			
Configuration			
Driver Name			
Licence #		Copy <input type="checkbox"/>	Expiry Date
			State



**INSURANCE DETAILS**

<b>Motor Vehicle Third Party Vehicle</b>		<b>Public Liability</b>	
Name of Insurer:		Name of Insurer:	
Expiry Date:	Policy number :	Expiry date:	Policy number:
Sum insured: <i>Third Party Liability coverage must be \$30,000,000</i>		Sum insured: <i>Third Party Liability coverage must be \$20,000,000</i>	
<b>Marine Cargo/Transit Insurance/Carriers Legal Liability *</b>		<b>Trailers in Control</b>	
Name of Insurer:		Name of Insurer:	
Expiry Date:	Policy number :	Expiry Date:	Policy number :
Sum insured: Coverage must be to a minimum of \$500,000 any one conveyance		Sum insured: <i>Full Comprehensive cover – limit per trailer \$230,000 (If B-double 2 trailers to be noted )</i>	
<b>Workers Compensation</b>		<p><b>Copies of all relevant Certificates of Currency are to be attached</b></p> <p><b>NOTE: Stef's Transport must be listed as an interested party in Marine, Transit and Carriers policies</b></p>	
Name of Insurer:			
Expiry Date:	Policy Number:		
Bank Name:		Account Number:	
Account Name:		BSB:	

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

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

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

<b>Induction entered by:</b>	<b>Date</b>
------------------------------	-------------



### ADDITIONAL VEHICLE AND DRIVERS

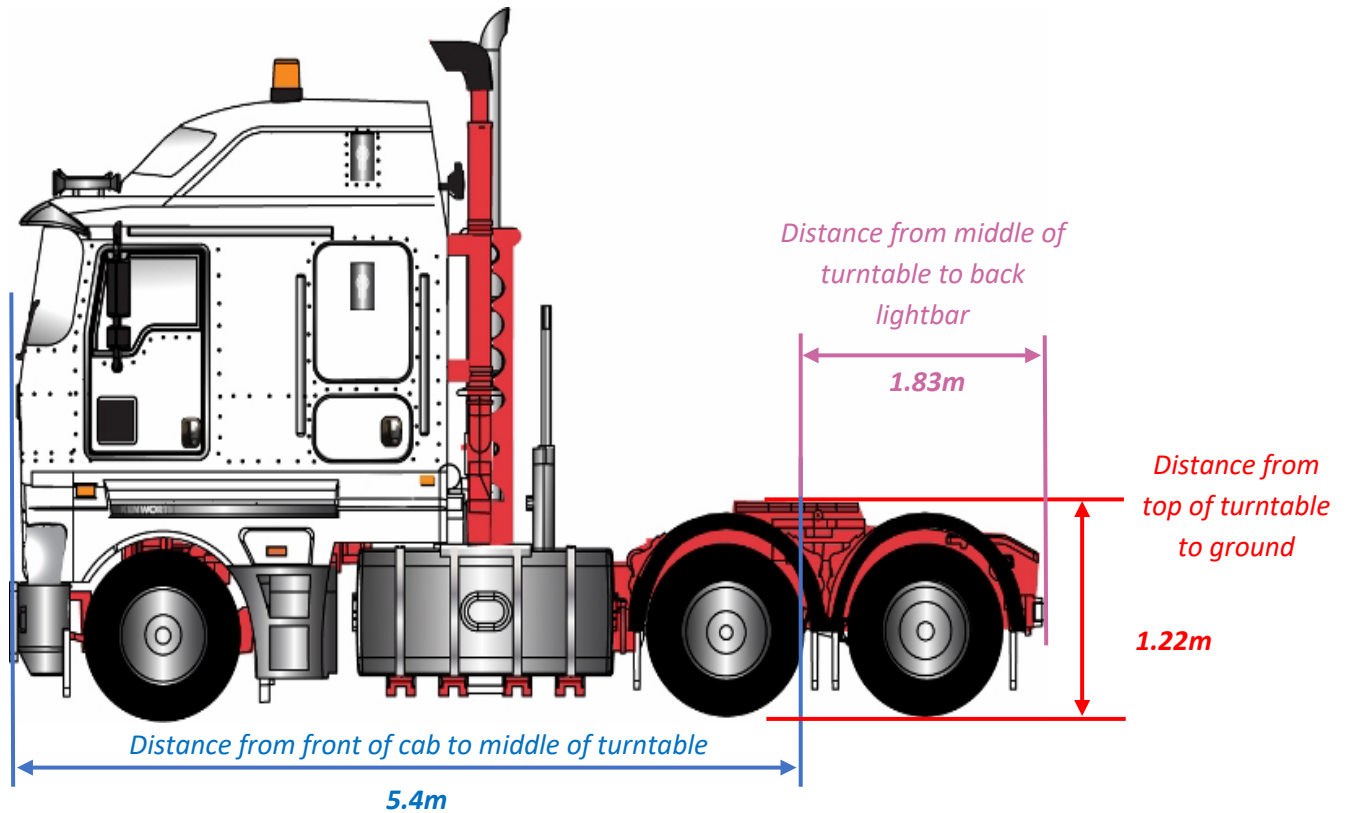
Prime Mover Make				
Registration				
Configuration				
Driver Name				
Licence #		Copy <input type="checkbox"/>	Expiry Date	State

Prime Mover Make				
Registration				
Configuration				
Driver Name				
Licence #		Copy <input type="checkbox"/>	Expiry Date	State

Prime Mover Make				
Registration				
Configuration				
Driver Name				
Licence #		Copy <input type="checkbox"/>	Expiry Date	State

Prime Mover Make				
Registration				
Configuration				
Driver Name				
Licence #		Copy <input type="checkbox"/>	Expiry Date	State

## Vehicle measurement requirements



Does your Truck(S) Comply with these measurements?			
Distance from front of cab to middle of turntable (including spotlights and bull bars)	5.4m	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Distance from middle of turntable to back lightbar	1.83m	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Distance from top of turntable to ground	1.22m	Yes <input type="checkbox"/>	No <input type="checkbox"/>

## Notes

1. This form is prepared for the purpose of section 175B of the *Workers Compensation Act 1987*, Schedule 2 Part 5 *Payroll Tax Act 2007* and section 127 of the *Industrial Relations Act 1996*. If this form is completed in accordance with these provisions, a principal contractor is relieved of liability for workers compensation premiums, payroll tax and remuneration payable by the subcontractor.

A principal contractor can be generally defined to include any person who has entered into a contract for the carrying out of work by another person (or other legal entity called the subcontractor) and where employees of the subcontractor are engaged in carrying out the work which is in connection with the principal contractor's business.

2. For the purpose of this Subcontractor's Statement, a principal contractor is a person (or other legal entity), who has entered into a contract with another person (or other legal entity) referred to as the subcontractor, and employees/workers of that subcontractor will perform the work under contract. The work must be connected to the business undertaking of the principal contractor.
3. Provide the unique contract number, title, or other information that identifies the contract.
4. In order to meet the requirements of s127 *Industrial Relations Act 1996*, a statement in relation to remuneration must state the period to which the statement relates. For sequential Statements ensure that the dates provide continuous coverage.

Section 127(6) of the *Industrial Relations Act 1996* defines remuneration 'as remuneration or other amounts payable to relevant employees by legislation, or under an industrial instrument, in connection with work done by the employees.'

Section 127(11) of the *Industrial Relations Act 1996* states 'to avoid doubt, this section extends to a principal contractor who is the owner or occupier of a building for the carrying out of work in connection with the building so long as the building is owned or occupied by the principal contractor in connection with a business undertaking of the principal contractor.'

5. Provide the date of the most recent payment claim.
6. For Workers Compensation purposes an exempt employer is an employer who pays less than \$7500 annually, who does not employ an apprentice or trainee and is not a member of a group.
7. In completing the Subcontractor's Statement, a subcontractor declares that workers compensation insurance premiums payable up to and including the date(s) on the Statement have been paid, and all premiums owing during the term of the contract will be paid.
8. In completing the Subcontractor's Statement, a subcontractor declares that all remuneration payable to relevant employees for work under the contract has been paid.
9. In completing the Subcontractor's Statement, a subcontractor declares that all payroll tax payable relating to the work undertaken has been paid.
10. It is important to note that a business could be both a subcontractor and a principal contractor, if a business 'in turn' engages subcontractors to carry out the work. If your business engages a subcontractor you are to also obtain Subcontractor's Statements from your subcontractors.

## Statement Retention

The principal contractor receiving a Subcontractor's Statement must keep a copy of the Statement for the periods stated in the respective legislation. This is currently up to seven years.

### Offences in respect of a false Statement

In terms of s127(8) of the *Industrial Relations Act 1996*, a person who gives the principal contractor a written statement knowing it to be false is guilty of an offence if:

- (a) the person is the subcontractor;
- (b) the person is authorised by the subcontractor to give the statement on behalf of the subcontractor; or
- (c) the person holds out or represents that the person is authorised by the subcontractor to give the statement on behalf of the subcontractor.

In terms of s175B of the *Workers Compensation Act* and clause 18 of Schedule 2 of the *Payroll Tax Act 2007* a person who gives the principal contractor a written statement knowing it to be false is guilty of an offence.

## Further Information

For more information, visit the SafeWork NSW website [www.safework.nsw.gov.au](http://www.safework.nsw.gov.au), Revenue NSW website [www.revenue.nsw.gov.au](http://www.revenue.nsw.gov.au), or Office of Industrial Relations, Department of Commerce website [www.commerce.nsw.gov.au](http://www.commerce.nsw.gov.au). Copies of the *Workers Compensation Act 1987*, the *Payroll Tax Act 2007* and the *Industrial Relations Act 1996* can be found at [www.legislation.nsw.gov.au](http://www.legislation.nsw.gov.au).



ORGANISATION INFORMATION	
Organisation Name:	
Services Provided	
Site Address(es)	
Number of Employees	
Compliance Statement Completed by	
Contact Telephone Number	

### What is the purpose of this compliance statement?

Stef's Transport Pty Ltd recognises its duty of care under National, State and Territory Chain of Responsibility, Transport Industry and Occupational Health and Safety Legislation for the management of subcontractor road transport operators. Legislation places obligations on prime contractors to manage subcontractor activities. This compliance statement checklist has been designed to provide Road Transport Subcontractors with guidelines for meeting minimum standards expected for an approved Stef's Transport Pty Ltd Transport Subcontractor.

This checklist is to assist transport operators understand and fulfil their obligations under the *Heavy Vehicle National Law 2012* and relevant workplace safety legislation. Stef's Transport Pty Ltd Road Transport Subcontractors need to review this document in line with their organisation policies and procedures, provide responses to each applicable section, and where requested, provide documented evidence of compliance.

## SAFETY AND COMPLIANCE

1	<b>Policy System</b>			
1.1	Does your organisation have a OH&S Policy	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
1.2	Does your organisation have a Safety System	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
1.3	Does your organisation have an employee responsible for updating legislative change and distributing that information?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

1.4	<b>Personal Protective Equipment (PPE)</b>			
1.4.1	Is appropriate PPE issued to your employees?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
1.4.2	Are the organisation's employees appropriately trained in the issued PPE?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

1.5	<b>Compliance</b>			
1.5.1	Is your organisation accredited for programs such as; Fatigue, Maintenance, Mass Management, Trucksafe etc.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
<i>If Yes, please provide a copy of the accreditations</i>				
1.5.2	Does your organisation undertake internal audits?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
<i>If Yes, please provide information about the regularity and subject matter audited.</i>				

Issue Date	Review Date	This document in printed form is an UNCONTROLLED document.	Issue
Feb 2021	Feb 2023		3



--

## TRAINING AND LICENCES

<b>2</b>	<b>Training, Qualifications and Licences</b>			
2.1	Does your organisation induct new employees to their position?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
2.2	Are the organisation employees OH&S inducted?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
2.3	Does your organisation undertake a heavy vehicle driving test with new drivers?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
2.3	Does your organisation maintain employee driver licence records?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
<p>If Yes, please provide information on how you record licence information, ensure licences are valid and that employees only drive vehicles for which they are suitably licensed.</p>				

## INCIDENT MANAGEMENT

<b>3</b>	<b>Incident and Collision Reporting and Investigations</b>			
3.1	Does your organisation have an internal incident reporting policy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
3.2	Does your organisation have an internal collision reporting policy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
3.3	Does your organisation have an investigation policy and procedures?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
3.4	Have you, your organisation or organisation executive/management been issued an improvement or prohibition notice or been prosecuted in the previous 3 years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
3.5	Are you, your organisation and your employees prepared to comply with Stef's Transport's policies and procedures, as relevant to the working relationship?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

## VEHICLE & SAFETY EQUIPMENT

<b>4</b>	<b>Vehicles</b>			
4.1	Are your prime movers fitted with an audible park brake alarm or an automatic applied brake system?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
4.2	Does your organisation have a daily prestart vehicle inspection regime?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

Issue Date Feb 2021	Review Date Feb 2023	This document in printed form is an UNCONTROLLED document.	Issue 3
------------------------	-------------------------	---	------------





4.3	Are your vehicles fitted with a driver fatigue monitoring system?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
<i>If Yes, please provide system details?</i>				
4.4	Are your vehicles fitted with an Electronic Work Diary (EWD)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
<i>If Yes, please provide EWD brand and model and satellite tracking information.</i>				
4.5	Do you have NHVAS Maintenance Accreditation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
<i>If No, please provide service regularity information and proof of your vehicle latest 'C' service</i>				
4.6	Does your organisation maintain records of vehicle defects and other safety related interceptions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

### TRANSPORT SAFETY

<b>5</b>	<b>Driver Training</b>			
5.1	Do you have an organisation Driver Manual?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
5.1.2	Are your drivers trained in Vehicle Mass?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
5.1.3	Are your drivers trained in Vehicle Dimensions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
5.1.4	Are your drivers trained in Load Restraint?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
5.1.5	Does your organisation instruct its drivers to comply with the current National Transport Commission, Load Restraint Guide?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
5.1.6	Do you undertake regular Driver - Toolbox Training?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
5.1.7	Do you maintain records of staff training?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
<b>5.2</b>	<b>Driver Health</b>			

Issue Date Feb 2021	Review Date Feb 2023	This document in printed form is an UNCONTROLLED document.	Issue 3



5.2.1	Does your organisation have procedures relevant to driver fitness for duty?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
5.2.2.	Do your organisation maintain records of your driver's medical assessments as required by legislation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

### CONTRACTOR & DRIVER COMPLIANCE

<b>6</b>	<b>Fatigue Management</b>			
6.1	Does your organisation have a Fatigue Management Policy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
6.1.2	Are your drivers trained/informed of their responsibilities in; <ul style="list-style-type: none"> <li>• Driving hours</li> <li>• Fatigue Management (incl. self-assessment)</li> <li>• Fitness for Duty</li> <li>• Chain of Responsibility</li> <li>• NHVL</li> </ul>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
6.1.3	Are your rosters and work schedules designed to comply with regulated driving hours and fatigue management?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
6.1.4	Does your organisation have procedures to monitor driver work and rest compliance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
6.1.5	What work hours rules are your drivers working under? If your drivers are operating under more than one, please provide a list of names and their working hours.	Standard <input type="checkbox"/>	BFM <input type="checkbox"/>	AFM <input type="checkbox"/>
6.2	<b>Speed</b>			
6.2.1	Does your organisation have a Speed Management Policy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
6.2.2	Does your organisation audit vehicle speeds?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
If yes, please provide information regarding regularity and process.				
6.2.3	Does your organisation maintain records of over-speeds?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
6.2.4	Does your organisation maintain records of expiation notices?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
6.2.5	Does your organisation maintain records of requests to produce documents by authorised agencies?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>



<b>6.3</b>	<b>Mass Management</b>			
6.3.1	Does your organisation have a Mass Management Policy??	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
6.3.3	Does your organisation have Mass Management Accreditation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
If No, how does your drivers assess that vehicles are loaded within legislated limits?				

## SUBCONTRACTORS

<b>7</b>	<b>Subcontractors</b>			
7.1	Does your organisation intend to subcontract work contracted to your organisation by Stef's Transport Pty Ltd?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
If Yes, how are the subcontractors selected and what are the business and legislative compliance expectations?				
How does your organisation intend to (or currently) monitor Chain of Responsibility and/or Occupation Health and Safety by the subcontractor?				

## SUBCONTRACTOR SIGN OFF

I the undersigned, am authorised to represent, (*organisation*)

I have provided, to the best of my knowledge, true and accurate answers and information to the applicable questions in the Contractor Compliance Form.

I have provided copies of all documents required that are relevant to our organisation to verify the requirements of Chain of Responsibility, Heavy Vehicle National Law and Workplace Health and Safety.

The signatory also acknowledges his organisation, employees and contractors will comply with relevant Stef's Transport Pty Ltd Manuals, Plans, Policies, Procedures and Quality Statement.

Name:  
Position:

Sign: \_\_\_\_\_ Date:            /            /

Please send the signed form and associated documents to [compliance@stefstransport.net.au](mailto:compliance@stefstransport.net.au)

Issue Date	Review Date	This document in printed form is an UNCONTROLLED document.	Issue
Feb 2021	Feb 2023		3

## Subcontractor's Statement Regarding Worker's Compensation, Payroll Tax and Remuneration

(Note 1 – see back of form)

For the purposes of this Statement a “subcontractor” is a person (or other legal entity) that has entered into a contract with a “principal contractor” to carry out work.

This Statement must be signed by a “subcontractor” (or by a person who is authorised, or held out as being authorised, to sign the statement by the subcontractor) referred to in any of s175B *Workers Compensation Act 1987*, Schedule 2 Part 5 *Payroll Tax Act 2007*, and s127 *Industrial Relations Act 1996* where the “subcontractor” has employed or engaged workers or subcontractors during the period of the contract to which the form applies under the relevant Act(s). The signed Statement is to be submitted to the relevant principal contractor.

### Subcontractor's Statement

Refer to the back of this form for Notes, period of Statement retention, and Offences under various Acts.

Subcontractor: ..... ABN: .....  
(Business name)

of .....  
(Address of subcontractor)

has entered into a contract with ..... ABN: .....  
(Business name of principal contractor) (Note 2)

Contract number/identifier .....

This Statement applies for work between: DD/MM/YYYY and DD/MM/YYYY inclusive, (Note 4)

subject of the payment claim dated: DD/MM/YYYY (Note 5)

I, ..... a Director or a person authorised by the Subcontractor on whose behalf this declaration is made, hereby declare that I am in a position to know the truth of the matters which are contained in this Subcontractor's Statement and declare the following to the best of my knowledge and belief:

(a) The abovementioned Subcontractor has either employed or engaged workers or subcontractors during the above period of this contract. Tick  if true and comply with (b) to (g) below, as applicable. If it is not the case that workers or subcontractors are involved or you are an exempt employer for workers compensation purposes tick  and only complete (f) and (g) below. You must tick one box. (Note 6)

(b) All workers compensation insurance premiums payable by the Subcontractor in respect of the work done under the contract have been paid. The Certificate of Currency for that insurance is attached and is dated DD/MM/YYYY (Note 7)

(c) All remuneration payable to relevant employees for work under the contract for the above period has been paid. (Note 8)

(d) Where the Subcontractor is required to be registered as an employer under the *Payroll Tax Act 2007*, the Subcontractor has paid all payroll tax due in respect of employees who performed work under the contract, as required at the date of this Subcontractor's Statement. (Note 9)

(e) Where the Subcontractor is also a principal contractor in connection with the work, the Subcontractor has in its capacity of principal contractor been given a written Subcontractor's Statement by its subcontractor(s) in connection with that work for the period stated above. (Note 10)

(f) Signature\* ..... Full name .....

\*Once the form is complete please print and sign.

(g) Position/Title ..... Date DD/MM/YYYY

**NOTE:** Where required above, this Statement must be accompanied by the relevant Certificate of Currency to comply with section 175B of the *Workers Compensation Act 1987*.

## Notes

1. This form is prepared for the purpose of section 175B of the *Workers Compensation Act 1987*, Schedule 2 Part 5 *Payroll Tax Act 2007* and section 127 of the *Industrial Relations Act 1996*. If this form is completed in accordance with these provisions, a principal contractor is relieved of liability for workers compensation premiums, payroll tax and remuneration payable by the subcontractor.

A principal contractor can be generally defined to include any person who has entered into a contract for the carrying out of work by another person (or other legal entity called the subcontractor) and where employees of the subcontractor are engaged in carrying out the work which is in connection with the principal contractor's business.

2. For the purpose of this Subcontractor's Statement, a principal contractor is a person (or other legal entity), who has entered into a contract with another person (or other legal entity) referred to as the subcontractor, and employees/workers of that subcontractor will perform the work under contract. The work must be connected to the business undertaking of the principal contractor.
3. Provide the unique contract number, title, or other information that identifies the contract.
4. In order to meet the requirements of s127 *Industrial Relations Act 1996*, a statement in relation to remuneration must state the period to which the statement relates. For sequential Statements ensure that the dates provide continuous coverage.

Section 127(6) of the *Industrial Relations Act 1996* defines remuneration 'as remuneration or other amounts payable to relevant employees by legislation, or under an industrial instrument, in connection with work done by the employees.'

Section 127(11) of the *Industrial Relations Act 1996* states 'to avoid doubt, this section extends to a principal contractor who is the owner or occupier of a building for the carrying out of work in connection with the building so long as the building is owned or occupied by the principal contractor in connection with a business undertaking of the principal contractor.'

5. Provide the date of the most recent payment claim.
6. For Workers Compensation purposes an exempt employer is an employer who pays less than \$7500 annually, who does not employ an apprentice or trainee and is not a member of a group.
7. In completing the Subcontractor's Statement, a subcontractor declares that workers compensation insurance premiums payable up to and including the date(s) on the Statement have been paid, and all premiums owing during the term of the contract will be paid.
8. In completing the Subcontractor's Statement, a subcontractor declares that all remuneration payable to relevant employees for work under the contract has been paid.
9. In completing the Subcontractor's Statement, a subcontractor declares that all payroll tax payable relating to the work undertaken has been paid.
10. It is important to note that a business could be both a subcontractor and a principal contractor, if a business 'in turn' engages subcontractors to carry out the work. If your business engages a subcontractor you are to also obtain Subcontractor's Statements from your subcontractors.

## Statement Retention

The principal contractor receiving a Subcontractor's Statement must keep a copy of the Statement for the periods stated in the respective legislation. This is currently up to seven years.

### Offences in respect of a false Statement

In terms of s127(8) of the *Industrial Relations Act 1996*, a person who gives the principal contractor a written statement knowing it to be false is guilty of an offence if:

- (a) the person is the subcontractor;
- (b) the person is authorised by the subcontractor to give the statement on behalf of the subcontractor; or
- (c) the person holds out or represents that the person is authorised by the subcontractor to give the statement on behalf of the subcontractor.

In terms of s175B of the *Workers Compensation Act* and clause 18 of Schedule 2 of the *Payroll Tax Act 2007* a person who gives the principal contractor a written statement knowing it to be false is guilty of an offence.

## Further Information

For more information, visit the SafeWork NSW website [www.safework.nsw.gov.au](http://www.safework.nsw.gov.au), Revenue NSW website [www.revenue.nsw.gov.au](http://www.revenue.nsw.gov.au), or Office of Industrial Relations, Department of Commerce website [www.commerce.nsw.gov.au](http://www.commerce.nsw.gov.au). Copies of the *Workers Compensation Act 1987*, the *Payroll Tax Act 2007* and the *Industrial Relations Act 1996* can be found at [www.legislation.nsw.gov.au](http://www.legislation.nsw.gov.au).