

Statutory Declaration – Payment of Workers

Evidence Act 1958 (Vic)

I, _____

Insert full name of Declarant

of _____

Insert address

do solemnly and sincerely declare that:

1 I am a representative of _____ ("*Contractor*")

Insert name of Contractor, and ACN if applicable

A.C.N. _____ in the Office Bearer capacity of _____

Insert position title of Declarant

2 I personally know the facts that I have set out in this declaration and the exhibit thereto and that they are true and correct in every particular.

3 The Contractor has a contract with the Roads Corporation for

 _____ ("*Contract*") No _____.

Insert Contract description and Contract No.

4 All workers engaged by the Contractor in connection with the work under the Contract have, in respect of their employment on work under the Contract:-

(a) been paid all moneys which as at the date of this declaration are due and payable to them; and

(b) otherwise received or had accrued to their account all benefits to which they are entitled as at the date of this declaration pursuant to any award, enterprise agreement, act or regulation apart from the workers listed in the "Schedule of Unpaid Workers" (consisting of _____ pages and attached as Exhibit "A") for the respective amounts and benefits shown in this Schedule. The Schedule also shows the addresses of each worker listed and the description of the amount or benefit not paid or received or accrued eg wages, holiday pay, allowances or superannuation).

Include in the Schedule names and addresses of the unpaid workers, the benefits not paid or received or accrued, the amounts unpaid and the reasons for non-payment.

Include number of pages of Exhibit "A".

And I make this solemn declaration conscientiously believing the same to be true and correct in every particular and by virtue of the provisions of the Evidence Act 1958 (Vic) and in the belief that a person making a false declaration is liable to the penalties of perjury.

SIGNATURE OF PERSON MAKING DECLARATION	
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Declared at _____ in the State of Victoria

Insert Place where the declaration is made

On _____ day of _____, _____

Insert Date of the declaration

Before me:	SIGNATURE	
	PRINT NAME	
	ADDRESS	
	QUALIFICATION	Person legally authorised to take a statutory declaration under the Evidence Act 1958 (Vic) or where the declaration is sworn outside the State of Victoria, any person having authority to administer an oath in that place.

