#### DEPARTMENT OF THE AIR FORCE



337<sup>TH</sup> AIR SUPPORT FLIGHT (PACAF) U.S. EMBASSY CANBERRA, AUSTRALIA

01 August 2022

## MEMORANDUM FOR DOD SOFA MEMBERS STATIONED IN AUSTRALIA

FROM: 337th AIR SUPPORT FLIGHT, CANBERRA AUSTRALIA

SUBJECT: Fuel Tax Reimbursement for Members under the Status of Forces Agreement

- 1. The Fuel Tax Reimbursement program enables SOFA status members assigned to Australia to receive a refund of Australian taxes after purchasing petrol for use in their personal vehicles. The program takes advantage of a provision in the SOFA allowing for tax-free sales to eligible DoD members, without the need to establish the traditional AAFES-operated gas station or gas coupon system found at other overseas installations. This program provides a significant benefit to our members; approximate reimbursement amounts are from the Goods and Services Tax (GST) equal to 10% of cost per liter and Excise Tax approximately equal to \$.38 (AUD) per liter of petrol consumed.
- 2. The significant provisions of the program include:
  - a. **Eligibility:** Department of Defense members stationed in Australia in a permanent duty status under SOFA status and their dependents.
  - b. **Status of Accounts:** Accounts are private between the credit provider (*Motorpass*) and the individual cardholder. Individuals may use the *Motorpass* card at over 8,000 service stations nationwide to purchase petrol at the posted rate, including most Ampol, BP, Caltex, Mobil and Shell outlets. Always check before you pump that that particular station accepts the *Motorpass* card.
  - c. **Billing Cycle:** The *Motorpass* billing cycle is based on the calendar month, with individual members receiving notice of their account activity for the previous month during the first week of the following month. Bills are paid by direct debit from individual members Australian bank accounts on the 15<sup>th</sup> of every month.
  - d. **Fuel Tax Reimbursement Cycle:** *Motorpass* employees will provide the 337th Air Support Flight (ASUF) a monthly accounting of the liters purchased by each member at the end of each month. The 337 ASUF will then submit an aggregated claim to the Australian Tax Office (ATO), and the Australian Defence Force (ADF) for reimbursement of the Excise Tax and GST. After receiving reimbursement from the ATO and ADF the U.S. Embassy's Financial Management Center will electronically deposit the combined refund into each member's U.S. bank account. *NOTE: This process can take a couple of months, due to the multi-stage process the refunds must go through.*
  - e. **Ration Amounts:** Unaccompanied members are entitled to reimbursement for up to 350 liters per month and accompanied members with driving dependents are entitled to 700 liters per month per family.
  - f. Closure of Accounts: Members *must* contact 337 ASUF to report their departure date to close their account. Members are also responsible for proof of the destruction of the card(s) via email or telephone call to 337 ASUF. Members are responsible for maintaining sufficient funds in their Australian bank accounts to pay their

#### DEPARTMENT OF THE AIR FORCE



337<sup>TH</sup> AIR SUPPORT FLIGHT (PACAF) U.S. EMBASSY CANBERRA, AUSTRALIA

monthly bills and for keeping the account open until the final bill is paid prior to Permanent Change of Station (PCS).

- g. Fees: *Motorpass* charges \$5.00(AU) joining fee per card, this is also charged to add subsequent cards. The monthly fees is \$3.37(AU) management fee per card, under the account. **Additionally**, there is a \$15.00 fee for exceeding the monthly liters limit.
- 3. The enclosed application forms provide the details for the members to establish their accounts. This program is unique in that it does not have the typical controls found in an AAFES operation. Therefore, Commanders, Installation Chiefs or Directors of Personnel (DP) must verify eligibility by reviewing members' orders, signing their application forms, and ensuring members' accounts with *Motorpass* are properly closed prior to PCS. This is a privilege for which we are afforded under the SOFA and the Australian government expects us to strictly police. Misuse of the card for fuel purchases for vehicles other than those registered in the military members' name will result in cancellation of the privilege, in addition to appropriate disciplinary action by the individual's command.
- 4. Please complete all sections of the attached application and return to the 337 ASUF. Upon receipt of the application, the 337 ASUF will forward the application to *Motorpass* and the gas credit card will arrive in a few weeks. Please mail the application to the following address:

<u>Australian Post</u> <u>US POST</u>

337 ASUF/FM US DEPARTMENT OF STATE

U.S. Embassy OR 337 ASUF/FM

21 Moonah Place 7800 CANBERRA PLACE

Yarralumla ACT 2600 WASHINGTON DC 20521-7800

If you have any questions or suggestions, please contact SSgt Kyle Turner or MSgt Knight at (02) 6214-5827/5979 or email at <a href="mailto:kyle.turner.9@us.af.mil">kyle.turner.9@us.af.mil</a> or <a href="mailto:antawn.knight@us.af.mil">antawn.knight@us.af.mil</a>

BRIAN S. BARBA, Lt Col, USAF Commander, 337 ASUF

# REGIONAL FINANCIAL MANAGEMENT CENTER CANBERRA

In line with U.S. Congressionally mandated requirement that all Federal payments be converted to Electronic Funds Transfer (EFT), FSC Bangkok requires the details set forth herein to convert Australian Dollar salary payments from the current check method to EFT.

# **DIRECT DEPOSIT SIGN UP**

Directions: 1) PLEASE TYPE OR BLOCK PRINT CLEARLY

2) ATTACH A VOIDED, BLANK PERSONAL CHECK

3) ALL SECTIONS <u>MUST</u>BE COMPLETED

## **EMPLOYEE INFORMATION**

NAME:		
(Last)	(First)	(Middle)
LAST FOUR DIGIT SSN (A	· · · · · · · · · · · · · · · · · · ·	LES NUMBER:
USDH EMPLOYEE ID (STA	ATE ONLY):	
ADDRESS:		
E-MAIL ADDRESS:		
	<u>AGENC</u>	Y INFORMATION
AGENCY/SECTION:		OFFICE TELEPHONE NUMBER:
ICASS AGENCY CODE TO	CHARGE:	
	FINANCIAL INST	<u>FITUTION INFORMATION</u>
NAME OF FINANCIAL IN	STITUTION:	
BRANCH AND ADDRESS:	· -	
* ACCOUNT NAME :		
ACCOUNT NAME .		
** ACCOUNT NUMBER:	MED.)	(9 digit number on lower left part of check)
ROUTING NUMBER : (AMBANK CODE (BSB): (AU	,	(6 digit number on lower left part of check)
, , ,	•	
* Name exactly as it ap	CHECKING	☐ SAVINGS
		atement (exclude financial information).
CERTIFICATION: In signing this form, I the designated accoun		t to be sent to the financial institution named above to
SIGNATURE OF ACCOUNT	NT HOLDER	DATE
(RFMC will not proce	ss this application with	nout the proper signature.)
RFMC APPROVING OFF	ICER	DATE



# UNITED STATES GOVERNMENT U. S. EMBASSY

**Canberra, Australia** Tel: +61 (2) 6214 5600

# **AUTHORIZATION FOR ACCOMMODATION EXCHANGE**

 $\square$  PCS or  $\square$  TDY

	Date:					
Full Name:						
Current Home Address:						
Current Home Telephone:						
E-mail address:						
Agency/Section:						
Phone:						
Length of Stay FROM:	TO:					
Agency Head printed name:						
ICASS Agency Code to Charge:						
Signature of Agency Head:	Date:					
If you are at post on <u><b>TDY</b></u> , plea	se provide Control Officer's Name and Agency/Office					
Control Officer:						
Control Officer's Agency/Office:						
Control Officer is responsible fo	r providing contact information if follow up is required.					
Signature of US Embassy FMO:	Date:					

#### **PLEASE NOTE:**

To provide access to an Eligible Family Member (EFM) for Accommodation Exchange, you must provide *Power of Attorney* for this purpose. Please ask Cashier for *Power of Attorney* form.

To access the cashier after normal operating hours or to request to cash a check for more than the weekly maximum amount (\$1,000), you must obtain Financial Management Officer or Management Officer approval. However, approval will be given sparingly and will only be granted in emergency circumstances. Note: Forgetting to cash a check before the weekend is not an emergency.



# Motorpass Individual Application Form for the Embassy of the United States of America

Please return completed applications to:

337ASUF.FM.Finance@US.AF.MIL

Enquiries: (02) 6214 5979



## Do not apply online

For the fastest and most convenient way to apply, visit www.motorpass.com.au

# Member get member reward!

ACCOUNT/MERCHANT NAME Enter referrer details (if applicable) ACCOUNT/MERCHANT NUMBER

Account Details (All applicants to complete relevant sections)	Payment Options
Please complete all sections. Choose Option (1. DRIVER & VEHICLE) or (OPTION 2.	Request and Authority to debit the account named below to pay Wright Express.
DRIVER ONLY). OPTION 2. DRIVER ONLY is suggested.	Surname or Last Name: Given Names or First Name:
Individual Application Details	("you")
Family name: Given name:	
	We request and authorise Wright Express (Direct User Identification Number 028424) to arrange, through its own financial institution, for any amount Wright Express may debit or charge us from time to time to be debited through the Bulk Electronic Clearing System from an account held at the financial institution identified below and paid to Wright Express, subject to the terms and conditions of the Direct Debit Request Service Agreement.
Residential address: (No APO/DPO)	Insert the name and address of the financial institution at which the account is held
	Financial Institution Name: *Australian Banks only*
Postal address: (No APO/DPO)	Australian Bank Address:
Telephone number (landline): mandatory  Mobile phone:	Insert details of account to be debited
	Account Name (ie. JOHN SMITH):
Email address:	
	DCD.
Driver's Licence number: Expiry date:	BSB: Account Number:
Date of birth: Position held:	Acknowledgement
	By signing this Direct Debit Request you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and us as set out in this Request and in this Direct Debit Request Service Agreement. Debit Payments will be made fourteen days
Employer: Employer's phone number (landline): mandatory	after the issue of a billing advice.
U.S. Government (02) 6214-5979	Before signing, read the Direct Debit Request Service Agreement below
Mobile prione:	(for a company, sign and print full
Employment commenced: (Date Arrived in Country)	name and capacity for signing)
Full time Part time	
Full time Part time	
Credit Limit Requested	FEES  ManagementFee CardFee Total Fee
Please calculate the <b>total</b> amount required for all cards on your account per six week period.	\$2.69 \$0.68 \$3.37
\$200	
$ \begin{array}{llllllllllllllllllllllllllllllllllll$	Motorpass statements will be sent electronically to your nominated email address.  Please send me paper statements: a fee of \$3.95 per statement applies.

\*Remember to include any additional purchases, such as tyres, service or repairs.

^Direct Debit Request Service Agreement This agreement sets out the terms on which you have authorised Wright Express to arrange for amounts owing to Wright Express to be debited from your account at your financial institution. 1. Debiting arrangements

- Our ('Wright Express') obligations to you: The details of your debiting arrangement are shown in your Direct Debit Request (DDR). By you signing the DDR, you authorise us to debit the amounts that become payable to us from your account at the financial institution

written on your DDR. We will only arrange for funds to be debited from your account if we have sent to the address stated on the DDR a billing advice specifying the amount payable byyou to us and when it is due. If a debit date falls on a day which is not a business day, the debit will be made on the next business day. We will keep your direct debit records and account details confidential, except where the disclosure of certain information is required by law or is necessary for the purposes of this agreement. We may vary any details of this agreement at any time after giving you 14 days written notice. 2. Your rights – You can discuss, and in some instances change, arrangements under the DDR by phoning us on 1300 366 109. If you wish to stop, defer or cancel the payments under the DDR, you must notify us in writing at least 3 business days before the next debit date. If you consider that there has been an error in debiting your account, you should call us on 1300 366 109 in the first instance. If we cannot resolve the mater, you can still refer it to your financial institution. 3. Your responsibilities—It is your responsibility to: \* ensure that your financial institution accepts direct debits on your nominated account (direct debiting may not be available on all accounts); \* ensure that there are sufficient funds in your nominated account by the due date to enable debits to be made by us. If debiting is unsuccessful due to insufficient funds, we reserve the right to re-draw at such times as we determine and you may be charged a fee by us and your financial institution; \* ensure that your account details on your DDR are correct-and that the authority given to us to debit your or unsure that your account details on your DDR are correct-and that the authority given to us to debit your or unsure that your debiting arrangements are cancelled; and \* ensure that any goods and services tax on a supply made in connection with this agreement incurred by us is payable by you.

# Vehicle Management System

Name to appear on all cards (max.	25 characters): (Me	mbers Nam	e)						
1. PIN authorisation required fo     2. PIN authorisation required fo	r <b>SOME</b> cards - selec			Odometer rea	dings required	d when pu	rchasing	g fuel - pl	lease tick*
3. PIN authorisation NOT required  *Mandatory* (Choose option 1 OR 2) whichever best suits your needs.  Total number of cards required:						Oil	Services	Tyres	Wash
Use one option only; choose option 1or 2. Please contact us if you need extra cards.				or caras required	x	х	х	х	х
OPTION 1. DRIVER 8 Driver's name & vehicle registr		uired (Australia	an registered vehicle	mandatory)	Customis	ed restriction	ons are ava	ailable on	request.
Driver's Name (up to 20 characters)	Vehicle Registration (up to 8 characters)	Vehicle Mak (up to 15 char		ehicle Model p to 12 characters)	Card Controls	Cost Centre Code	CostCen Descripti		PIN required
OPTION 2. DRIVER ( Driver's name only, signature s  Up to 80 characters)			dividuals not vehicle	)	Card Controls	Cost Centre Code	Cost Cen Descripti		PIN required
*Please note: This option is not available w Acknowledgements and Privacy Act Authorisations P declaration at the end of the section. Acknowledgement application. Us or we means Wright Express Australia P requested; 2. acknowledge that we may approve the ap when an account is opened) by opening an account in yo by you! you will be taken as having unconditionally accep provide a copy of the Motorpass Terms and Conditions application is true, correct and complete and you author! 8. authorise us to bill the account for monthly fees (asse controller or accountant, trade references, contractors a your application for a Motorpass Card. Without this infi application and administering the Motorpass card arra credit information file; 2. obtain a consumer credit repor credit provided by us to you; 3. exchange information at to notify other credit providers of a default by you; 3.3 to understand that the information exchanged can include a or a reproduction of it as evidence of this application fo provide you with, or arrange for a partner to provide you you with your nominated referees any person who has is printers, insurance companies, mail houses, solicitors, at promote our or their products and services; We acknowled  Declaration: I/We declare that the credit to be is to be applied wholly or predominantly for purposes other than investment in residentic sign this declaration if this credit application is purposes; or • investment purposes other tha signing this declaration you may lose your prot  I/We are duly authorised to sign on the EMPLOYEE	Please call 1300 366 109 for a futs Definitions Except for the purty Ltd. By making this application plication and make an offer to jurname; 3. acknowledge that by the detailed the Motorpass Terms and Coff Account (as in force from time ise us to check that information; et out in the Motorpass Terms are not landlord to verify and obtain ormation, we may not to be ablingements, we may: 1. give to a cottonaining information with othe open change information with othe open change information with othe open change information with othe nything about your credit worth of Motorpass cards and of the Act with, marketing information in introduced you to us; 8. disclose uditors, professional advisers and ge that you may, without charge provided to me/us by the county of the control of	all set of Terms and pose of the declaran, you: 1. requesting the application of Accourse to timely to any personal to the detail of the application of Accourse to timely to any personal to acknowledge the declaration of Accourse to the application of Accourse to the application of Accourse to the application of Accourse to the acknowledge that details pertaining the account of	Conditions of Account wations, the following definand authorise us to open coount to you on the terration form, signing a Moton at as governing the use an erson authorised by your at we rely on this informat count) which are subject to this application. By submitting ency personal information porting agency for the purplication or named in a coast of the status of your ang, credit history or credit to 5. use your personal information for the status of your ang, credit history or credit to 5. use your personal information and the status of your and you are the status of your and you are the your are the your and you are the your are the y	hich govern the use of titions apply throughout an account in your name is and conditions set out prease card, or using, of a did operation of your according to time to time to use a form time to time to use a form time to the state of the time to use a form time to the state of the time to use a form time to Act Authorisations by many and the state of t	ne account and Motor, the application form: ythe application form: ythe application form: ythe application form: ythe motor as a Motor and	ou or your means card/s for use is and Condition or pass card (whe or pass card sist or present and wate that a once on in writing; and 9. The arrivacy Act 1988 in writing agency: 3.1 to the providers; or 3 ange under the foliage, product de the see call us on 13 interface switch in eccessary by us	s the applicar on the account of the account of the row you on the decount of the row you on the row you as and while go everdue pay assess an app 4 to assess you will not seen you want of the row you want	nt or applicant to such pers (which will be; r any other perse on the according for any other perse on the according for any other perse of the according for according fo	is named in this ons as you have supplied to you rson authorised bount; 4. agree to provided in this bount applies; rbank, financial sible us to assess fassessing your data be keptonage to commercial reditby you; 3.2 chiness; and you this application and research; 6. formation about ervice providers, ur account or to