

### Information about claiming

Please note that this form is for claiming travel to work expenses only. Travel expenses incurred travelling to and from medical treatment and/or rehabilitation need to be completed on a *Travel Expenses: Declaration* form. If, because of your transport accident injuries, you are unable to travel to work in the way you did prior to your transport accident the TAC can reimburse reasonable expenses incurred travelling from your residence to your place of employment for a maximum period of 24 weeks and up to a maximum amount of \$1,460.

The amount of \$1,460 applies to travel to work between 1 July 2019 and 30 June 2020. If your travel was before 1 July 2019, please call the TAC to find out what amount applies to you.

The following travel expenses can be claimed:

- private vehicle -The TAC will reimburse you a set rate per kilometre if you require private travel provided by, for example, a partner, relative or friend as a result of your transport accident injuries
- public transport -To confirm the fares paid, please attach your tickets to this claim. For myki travel, you need to submit a travel declaration form and your myki statement, if you have one.
- taxi expenses - If you require taxi transport as a result of your transport accident injuries to enable you to travel to work, you will need to attach receipts for your travel.

A claim for expenses can be submitted to the TAC within two years from the date of travel. The TAC cannot consider any travel expense claim submitted outside two years.

### Your privacy

The TAC respects your privacy. The TAC will retain the information provided and may use or disclose it to make further inquiries or assist in the ongoing management of the claim or any claim for common law damages. The TAC may also be required by law to disclose this information.

Without this information, the TAC may be unable to determine entitlements or assess whether treatment is reasonable and may not be able to approve further benefits and treatment.

If you require further information about our privacy policy, please call the TAC on 1300 654 329 or visit our website at [www.tac.vic.gov.au](http://www.tac.vic.gov.au)

**For further information about travel expenses – including rates, please visit the TAC website at [www.tac.vic.gov.au](http://www.tac.vic.gov.au)**

### Client details

Client name

Client address

  
  
Post code

Claim number

Date of birth

Date of accident

### Other persons travelling

Please list below the name and address of any other person who travelled in a private vehicle with you to or from work

Name

Address

  
  
Post code

Claim number *if applicable*

Name

Address

  
  
Post code

Claim number *if applicable*



Transport  
Accident  
Commission

TRAVEL TO WORK:  
DECLARATION

Date of travel	Travel from address	Travel to address	Taxi amount claimed	Public transport amount claimed	Private vehicle km's

**Declaration**

I, [ ] of [ ]

confirm that the items above, relate to travel to and from work, required due to my transport accident injuries and are not for any pre-accident or unrelated medical condition, or any other purpose.

Signature of client, parent or guardian

[ ]

Print name

[ ]

Date

[ / / ]

Under section 117 of the *Transport Accident Act 1986* it is an offence to provide false or misleading information in connection with a claim.

