

TRAVEL TO WORK: **DECLARATION**

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 \$1,770.

This amount applies to travel to work between 1 July 2025 and 30 June 2026. If your travel was before 1 July 2025, 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.

You can make a claim for expenses with 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

For further information about travel expenses – including rates, please visit the TAC website at www.tac.vic.gov.au

Client details				
Client name	Claim number			
Client address	Date of birth	Date of accident		
	/ /	1 1		
Post code				
Other persons travelling				
Please list below the name and address of any other person who tra	velled in a private vehicle with you to	or from work		
Name	Name			
Address	Address			
Post code		Post code		
laim number if applicable	Claim number if applicable			

PO Box 2751



Telephone 1300 654 329 MELBOURNE VIC 3001 STD Toll Free 1800 332 556 www.tac.vic.gov.au

ABN 22 033 947 623







Date of travel	Travel from address	Travel to address	Taxi amount claimed	Public transport amount claimed	Private vehicle km's
Declaration		~4			
I, confirm that the items al	pove, relate to travel to and fro	of of om work, required due to my	transport accident iniu	ries and are not for an	y pre-accident or
unrelated medical condi	tion, or any other purpose.	. , . ,			, ,
Signature of client, pare	nt or guardian	Print	name	Date	
					1 1
Under section 117 of the	e Transport Accident Act 1986	Bit is an offence to provide fa	lse or misleading infor	mation in connection v	vith a claim.



