

HOUSEHOLD SUPPORT SERVICES: DECLARATION

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

Tick the appropriate box to indicate the type of service being claimed						
☐ Housekeeping ☐ Domestic services ☐ Home service	es					
Client details Client name	Claim number					
Client address Post code	Date of birth Date of accident					
Details of person claiming reimbursement (leave blank if you are the TAC client)	Ponk account details					
Name	BSB Account number					
Address	Contact details					
	Phone or mobile number					
Post code	Email					
Service provider details						
Service provider	Contact name					
Service provider address	Telephone number					
Post code						
Payment						
If you have already paid the service provider, please adv	vise the method of payment					
☐ Cash ☐ Cheque ☐ Credit card						
Receipts must be attached						



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Service details

Date of service	Start time	Finish time	Total no. of hours	Rate per hour \$	Total cost \$	Duties performed
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declaration .						

This is a mandatory section and must be completed when claiming a reimbursement for payments. If this section is not completed the declaration will be returned.

Signature of service provider	Print name	Date
		/ /
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.

TRANSPORT **ACCIDENT COMMISSION**



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