





WorkCover Queensland pays all compensation benefits by Electronic Funds Transfer (EFT). This means the money is paid directly into your bank account.

Please fill in this form with your bank account details and return it to us. This information will be kept securely, as outlined in our privacy policy, available on our website.

We will send you a payment summary every time we deposit a payment in your account.

How do I lodge this form?

-  **Online** at www.workcoverqld.com.au
-  **By phone** on 1300 362 128
-  **By fax** to 1300 651 387
-  **By post** to GPO Box 2459, Brisbane Qld 4001.

Section A: Worker's details

1 Surname or family name

2 Given names

Title

3 Date of birth / /

4 Current residential address

Number and street	
Suburb/town	Postcode

5 Worker's bank details

We pay claim and medical reimbursement payments by electronic funds transfer

Name of bank	
BSB number -	Account number
Account name	

Important information—read before agreement

Section B: Privacy and statement

Privacy

WorkCover is collecting your personal information in accordance with the *Workers' Compensation and Rehabilitation Act 2003* in order to assess your entitlement to compensation.

Your information will not be given to any other person unless you have given your consent, or we are authorised or required by law. For more information on privacy, visit our website at www.workcoverqld.com.au or call us on 1300 362 128.

Applicant's statement

I certify the above details are correct and authorise payment be made into the account shown.

Full name	
Date / /	<input type="checkbox"/> I agree