

NIISQ participant / individual bank details form



This form is for NIISQ participants / individuals to provide their bank details to receive reimbursements from the NIISQ Agency. Please complete **all** details below and send to procurement@niis.qld.gov.au.

Individual's contact details		
Contact name <i>Full name of person receiving reimbursement</i>		
First name	Middle name	Surname
Participant name		
Relationship to participant		Participant case number
Address	City/suburb	
	State	Postcode
	Phone number	
Email address <i>Your remittance advice will be sent to this email address</i>		
Bank details		
Bank name		
BSB number	Account number	
Account name <i>Name of the account holder</i>		
Signature		
	Name	
	Date	

The National Injury Insurance Agency, Queensland (**NIISQ Agency**) is collecting your personal information in order to perform our functions under the National Injury Insurance Scheme, Queensland (**NIISQ**). We collect, use, disclose and store your personal information in accordance with the *Information Privacy Act 2009* (Qld), the *National Injury Insurance Scheme (Queensland) Act 2016* (Qld) and the *National Injury Insurance Scheme (Queensland) Regulation 2016* (Qld). Your personal information will not be released unless the disclosure is permitted or required by law. Further information on how NIISQ Agency handles your personal information can be found in our privacy policy or by contacting our Privacy Officer on 1300 607 566 or privacy@niis.qld.gov.au.

1300 607 566 enquiries@niis.qld.gov.au

National Injury Insurance Agency, Queensland

niis.qld.gov.au