

Collect your reward

Victorian Seniors Card Application Form



Statutory Declaration

I (name) _____

of (address) _____

acknowledge that this declaration is true and correct and I make it knowing that a person making a false declaration is liable to the penalties of perjury.

Declared at (Suburb / Town) _____

Signature of applicant

Date _____
Day Month Year

Authorised person to complete

after sighting identification documents and verifying, (please tick):

- Applicant's name (driver's licence or utilities bill etc)
- Age (driver's licence, birth certificate or passport etc)
- Australian residency (Australian birth certificate, citizenship certificate, passport or permanent resident visa)
- Victorian address (Victorian driver's licence or utilities bill etc)

Before me _____

Authorised person to sign

Name _____

Address _____

Telephone Number _____

Title _____

Our contact details

 Telephone: 1300 797 210

Email: seniorscard@dpcd.vic.gov.au

Web site: www.seniorscard.vic.gov.au

Please post your completed form to:
Seniors Card Program
GPO Box 4316, Melbourne, Vic, 3001

Privacy statement

The personal information on this form is being collected so the Department of Planning and Community Development (DPCD) can administer the Seniors Card Program. DPCD is committed to maintaining the privacy of personal information and will adhere to the *Information Privacy Act 2000*.

