

When to use this form:

- Use this form when you are a current participant of the Taxi Transport Subsidy Scheme administered by Transport NSW, and you need to advise us of changes to your address, phone number or other contact details.

Completing this form:

- Complete the details below and send the form in to the Taxi Transport Subsidy Scheme by mail using the Reply Paid address (no stamp is required), by facsimile or email using the details listed at the bottom of this form.
- Please allow up to 2 weeks from receipt of this form by Transport NSW for your updated details to take effect.

TTSS Participant Details

Name: _____		
Account number:	<input style="width: 30px; height: 30px; border: 1px solid black;" type="text" value="0"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/>	Your TTSS account number is an eight digit number beginning with '0' at the bottom of all your TTSS dockets
Residential address: <i>(You must provide a residential address. It cannot be a postal box or other non-residential address)</i>		
Property name: _____		
Street address: _____		
Suburb/town: _____	State	<input style="width: 50px; height: 25px; border: 1px solid black;" type="text" value="NSW"/>
		Postcode _____ <small>Must be a NSW address to retain eligibility</small>
Previous residential address: <i>(You must provide a residential address. It cannot be a postal box or other non-residential address)</i>		
Property name: _____		
Street address: _____		
Suburb/town: _____	State	<input style="width: 50px; height: 25px; border: 1px solid black;" type="text" value="NSW"/>
		Postcode _____ <small>Must be a NSW address to retain eligibility</small>
Post address <input type="checkbox"/> Tick if same as above; otherwise complete		
Property name: _____		
Street address: _____		
Suburb: _____	State	Postcode _____
Telephone and email: <i>(You must provide at least one valid telephone number)</i>		
Home / TTY: _____	Mobile: _____	Work: _____
Email: _____		

TTSS Participant's Signature

The details provided above will be used to update and, if applicable, replace the current contact details on file.

Signature *(participant/carer)*: _____ Date: _____ / _____ / _____
day month year

Post completed form to: Taxi Transport Subsidy Scheme
 Reply Paid 79609
 Parramatta, NSW 2124

or

Email completed form to: ttss@transport.nsw.gov.au

Enquiries: Telephone: 1800 623 724 (Toll free)
 Email: ttss@transport.nsw.gov.au
 Website: www.transport.nsw.gov.au/ttss
 Fax: (02) 8836 3122

Office Use Only

TTSS Client ID:	Date entered:	Entered by:
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