



Notification of change of Officer or Director

Lodgement details

Who should PHIAC contact if there is a query about this form

Name

Position

Name of private health insurer

Telephone number

Email address

Particulars of change

Name of Officer or Director

Date of change
 / /

Attach Summary of Qualifications of new Officer or Director

Telephone number Fax number Mobile

Email address

Name of outgoing Officer or Director (if a replacement)

Mailing list inclusion

- Circulars PHIAC Annual Report Annual Report on health benefits funds Membership & Coverage Gap Stats

Contact person for

- PHIAC 1 Reporting PHIAC 2 Reporting PHIAC 3 Reporting PHIAC 4 Reporting

Signature

Application to be made by an officer of the private health insurer:

officer, of a private health insurer, means:

- (a) a *director of the insurer; or
- (b) a *chief executive officer of the insurer; or
- (c) a person who makes, or participates in making, decisions that affect the whole, or a substantial part, of the business of the insurer.

(Private Health Insurance Act 2007)

Declaration by applicant

I, (Name of officer making application on behalf of the private health insurer)

Position of officer

of Address

do hereby notify the Private Health Insurance Administration Council of a change of an Officer or Director of the abovementioned private health insurer under the *Private Health Insurance Act 2007* and declare that I am directed to make this application on behalf of the said private health insurer.

Signature of applicant

I certify that the information provided is true and correct. I am aware that the giving of false or misleading information, documents or statements to the Private Health Insurance Administration Council is a serious offence under the Commonwealth's *Criminal Code Act 1995* and that the Criminal Code Act imposes substantial penalties, including imprisonment, for committing these offences.

Name of officer

Signature

Day

Month

Year

Lodgement

Send completed, signed form with attachments to

Private Health Insurance Administration Council
Suite 16, 71 Leichhardt Street,
KINGSTON ACT 2604

For help or information
Telephone 02 6215 7900
Email phiac@phiac.gov.au