



## Claimant Report – Exposure to Arsenic

This form is in connection with your claim for pension and medical treatment and the information you supply will assist in deciding eligibility for benefits under the Veterans' Entitlements Act 1986 and/or Military Rehabilitation and Compensation Act 2004. In the event of an appeal against a decision, this information may be provided to the Veterans' Review Board, Administrative Appeals Tribunal or Federal Court.

### *Veteran's Details*

<b>Surname</b>	<b>Given Names</b>	<b>DVA File Number</b>

### *Report Detail*

1. Is there a history, **at any time** (service periods as well as non-service periods), of exposure to arsenic?
  - No** - Please sign the form and return it to the Department
  - Yes**
  
2. Please tick the relevant arsenic exposure and describe the circumstances of how it occurred:
  - consuming arsenic containing compounds (eg Fowler's solution)
  - consuming drinking water with arsenic content higher than 0.05ppm (50 mg/l)
  - being involved in the manufacture of pesticides containing arsenic
  - handling pesticides containing arsenic
  - having clinical evidence of excessive arsenic exposure

From	To	Place and circumstances
/ /	/ /	
/ /	/ /	
/ /	/ /	

### *Claimant's Signature*

**You are reminded that:**

- The Declaration you signed on the claim form also covers the information you supply on this form.
- There are penalties for knowingly making false or misleading statements.

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