

Letter of Determination (LOD) Reissue

ABN 91 021 040 318

Applicant details				
Applicant name:			Reference No:	
Email:				
Address:				
Reason for reissue				
Have not received in mail				
Information on current LOD is incorrect (LOD to be included with this form)				
Other (please provide brief explanation)				
-				
			D-1-	
Applicant signature:			Date:	
Authority to deduct credit card				
Amount (AU\$): 60.00			○ Visa ○ Mastercard	
Card No:			Expiry:	
Name of cardholder				
I, the cardholder, have read and understood ANMAC's Privacy Statement issued with this application. I consent to ANMAC collecting and using my personal information in accordance with the Privacy Statement.				
Signature of Cardholder:			Date:	
Office use only			GPO Box 400 Canberra City ACT 2601 AUSTRALIA	
Authorised by:		Date authorised:	T +61 (0)2 6257 7960 skilledmigration@anmac.org.au www.anmac.org.au	
Payment taken:		Payment date:		