Appointment of Advocate or Authorised Representative

If you wish to appoint an Advocate or Authorised Representative to deal with us on your behalf, please:

- 1. carefully read the important notes below;
- 2. carefully complete the form on the next page;
- 3. take it, with some proof of your identity, to a witness as indicated next;
- 4. sign it in the presence of a lawyer or doctor or pharmacist or or Centrelink officer or member of police as witness; and
- 5. post it to us at the address nominated on our website.

Important notes

- 1. An 'Advocate' whom you appoint can deal with us on your behalf (including making a complaint) but:
 - (a) cannot change your account or services; and
 - (b) cannot act on your behalf or access your information.
- 2. An 'Authorised Representative' whom you appoint can deal with us on your behalf as your agent (including making a complaint) and has power to act and access information as if they are you.
- 3. If we are not clear whether you intend to appoint an Advocate or an Authorised Representative, we shall assume you only intend to appoint an Advocate.
- 4. We may also accept a person who holds an appropriate Power of Attorney or Guardianship Order as an Authorised Representative for a customer. Please forward a certified copy of the Power of Attorney or Guardianship Order together with this form (signed by the Attorney or Guardian for the customer). We may need to have the documents checked before we can accept the appointment.
- 5. To protect your privacy and security and to minimise the risk of fraud, our requirement is that this Appointment be submitted by post as a signed original, witnessed by a lawyer or doctor or pharmacist or Centrelink officer or member of police.

Appointment of Advocate or Authorised Representative

I understand that I authorise you to deal with the below person as my Advocate or Authorised Representative (as applicable). I acknowledge responsibility for anything my Advocate or Authorised Representative does on my behalf within their authority as described in this Appointment. I release you from any claim I might otherwise have against you, based on anything you do in reasonable reliance on this Appointment. You may assume that you are dealing with the relevant person if they identify themselves as such when you contact any of the contact numbers / addresses above. The appointment continues until I revoke it in writing.

Dated	this	day of	20
Customer Detai	ls		
Customer numb	er:		
Account holder	name:		
Account holder	signature:		
Name of witnes	s:		
Occupation of w	vitness:		
Signature of wit	ness:		
their identity. If		tice of peace or police of	e has produced original evidence of ficer, apply stamp/seal at the
Representative	Details		
I wish to appoin	t (Advocate or Authoris	ed Representative):	
The name of pe	rson I appoint is:		
Their telephone	number is:		
Their email add	ress is:		
The signature of	f the authorised represe	ntative:	