

Appointment of Authorised Representative

Dear Customer,

If you wish to appoint an 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 Centrelink officer or member of police as witness; and
- 5. post it to us at PO Box 973 BURNIE TAS 7320.

Important notes:

1. What is an Advocate?

An 'Advocate' 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 unless you are present and agree.

2. What is an Authorised Representative?

An 'Authorised Representative' you appoint can deal with us on your beh alf as your agent (including making a complaint) and:

- (c) if you give them limited rights: has only those rights including any limitations you specify on access to your information; and
- (d) if you do not give them limited rights: has power to act and access information as if they are you.
- 1. We may accept a person who holds an appropriate Power of Attorney or Guardianship Order as 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.
- 2. 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 Authorised Representative

To: Tas Communications Pty Ltd	Date:	
My account type(s) Account Holder Name ¹ Internet Username Telephone Number My account ID or Email Address (if available)	Internet	Point to Point □
I wish to appoint an Authorised Representa The person I appoint is Their email address is Their landline number is Their mobile number is Their physical address is Limitation/s on authority of Authorised Re Limitations ²		
My appointment and authority I authorise you to deal with the above person as my Advocate or Authorised Representative I acknowledge responsibility for anything my 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 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		
My signature		
Signature of witness		
Name of witness		
Address of witness Witness Qualification Lawyer / do Confirmation by witness	octor / pharmacist /	centrelink officer / police officer
I confirm that the person signing above has produced evidence of their identity		

¹ Please note that this must be the actual account holder

² Complete if applicable