

Authorised Representative

InfiNET Broadband

Level 15, Corporate Centre One, 2 Corporate Court, Bundall, QLD, 4217

Appointment of Authorised Representative or Advocate

Dear Member,

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

- Read the below important notes;
- Complete the forms in this document;
- Have the form witnessed and signed in the presence of a doctor, pharmacist, lawyer or member of police as a witness;
- Post the original copy to us at the address listed above

If you require any assistance with this, please contact us.

Important notes:

• What is an Authorised Representative?

- An 'Authorised Representative' can deal with InfiNET Broadband on your behalf as your agent (including making a complaint) and:
 - if you give them limited rights: has only those rights including any limitations you specify on access to your information; and
 - If you do not give them limited rights: has power to act and access information as if they, are you.

What is an Advocate?

- An 'Advocate' can deal with InfiNET Broadband on your behalf (including making a complaint) but:
 - Cannot change your account or services; and
 - Cannot act on your behalf or access your information unless you are present and agree
- If InfiNET Broadband are not clear if you intend to appoint an Authorised Representative or Advocate, we will assume you intend to appoint an Advocate.
- InfiNET Broadband may also accept a person who holds an appropriate Power of Attorney or Guardianship Order as Advocate or 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). InfiNET Broadband might need to have the documents verified before we can accept the appointment.
- To protect your privacy and security and to minimise the risk of fraud, our requirement is that this Appointment be submitted by post as an original signed copy, witnessed by a doctor or pharmacist or lawyer or member of police.



Date:
То:
My account type/s (tick): ☐ Internet ☐ VoIP Phone ☐ Mobile
Account holder name (must be the actual account holder):
My account number:
Telephone number:
I wish to appoint either (tick one): ☐ an Authorised Representative; or ☐ an Advocate
The person I appoint (Full Name):
Their email address:
Their mobile number:
Their address is:
Limitation/s on authority of Authorised Representative/Advocate (Complete if applicable):
Time limits on appointment (complete if applicable):



Authorised Representative

My appointment and authority:

I authorise you to deal with the above person as my Authorised Representative or Advocate. I acknowledge responsibility for anything my Authorised Representative or Advocate or 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:
Qualification and address of witness (including registration details relating to witness qualification):
Doctor / Pharmacist / Lawyer / Police Officer (Please circle)
Confirmation by witness:
\square I confirm that the person signing above has produced evidence of their identity.