

# APPOINTMENT OF ADVOCATE OR AUTHORISED REPRESENTATIVE



Dear Customer,

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

- A. Carefully read the important notes below;
- B. Carefully complete the form that follows;
- C. Have your proof of your identity certified by an authorised person;
- D. Send all documentation by post to: PO Box 390, Toowong DC QLD 4066.

## 1. What is an Advocate?

An 'Advocate' is a person you can appoint to deal with us on your behalf (including making a complaint), but:

- (i) Cannot change your account or services; and
- (ii) Cannot act on your behalf or access your information unless you are present and agree.

## 2. What is an Authorised Representative?

An 'Authorised Representative' is a person you can appoint to deal with us on your behalf as your agent (including making a complaint) and:

- (i) If you give them limited rights; has only those rights including any limitations you specify on access to your information; and
- (ii) If you do not give them limited rights; has power to act and access information as if they are you.

## 3. Important To Note:

- a) If we are not clear whether you intend to Appoint an Advocate of an Authorised Representative, we will assume you only intend to appoint an Advocate.
- b) We 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).

**Note:** We may need to have the documents checked before we can accept the appointment are not clear whether you intend to Appoint an Advocate of an Authorised Representative, we will assume you only intend to appoint an Advocate.

## APPOINTMENT OF ADVOCATE OR AUTHORISED REPRESENTATIVE



- c) To protect your Privacy and Security and to minimise the risk of Fraud, our requirement is that you submit the completed Appointment of Advocate or Authorised Representative Form to us by post as a signed original and witnessed by one of the following approved persons below:
- ✓ Justice Of The Peace;
  - ✓ An Accountant who is a member of the Australian Institute of Chartered Accountants, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership;
  - ✓ A Solicitor or Barrister;
  - ✓ A Police Officer;
  - ✓ An Agent of, or a permanent employee with 2 or more years of continuous service of an Australia Post outlet;
  - ✓ An officer with, or authorised representative of, a holder of an Australian Financial Services Licence, having 2 or more continuous years of service with one or more licensees;
  - ✓ A Dentist;
  - ✓ A Pharmacist;
  - ✓ A Medical Practitioner;
  - ✓ A Chiropractor or a Physiotherapist.

If you find this approach too difficult or inconvenient, please contact us and we will do our best to find an alternate way of appointing an Advocate or Authorised Representative.

**Appointment of Advocate or Authorised Representative Form**

To: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**My Details:**

<b>Account Holder's Full Name</b> <i>(You must be the account holder to Appoint an Advocate or Authorised Representative)</i>			
<b>Account No.</b>		<b>Contact No.</b>	
<b>Email Address</b>			

**My Services:**

- Landline     Voice     Internet     Other \_\_\_\_\_

**I wish to Appoint:**

- Advocate     Authorised Representative

*Appointment Person's Details:*

<b>Full Name:</b>	
<b>Email Address:</b>	
<b>Contact Number:</b>	
<b>Physical Address:</b>	
<b>Limitation/s on Authority:</b> <i>(Specify anything that your Appointed Person should NOT be allowed to do on your behalf. If left blank, the Appointed Person has the power to act as if they were you.)</i>	

# APPOINTMENT OF ADVOCATE OR AUTHORISED REPRESENTATIVE



## My Appointment and Authority

“I, \_\_\_\_\_ (insert your full name) authorise Cadiz<sup>3</sup> (you) to deal with the above named person as my nominated Advocate or Authorised Representative. I acknowledge responsibility for all acts my Advocate or Authorised Representative does on my behalf, within the 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. This Appointment continues until I provide written confirmation to withdraw my nominated Advocate or Authorised Representative.”

CUSTOMER (Account Holder)	
Account Holder Signature:	

WITNESS	
“I confirm that the person signing above (Account Holder) has produced evidence of their identity.”	
Witness signature:	
Witness’s Full Name:	
Witness’s Address:	
Witness Capacity (JP, Solicitor etc.):	