

# Appointment of Authorised Representative

**Your details:**

Account Number: \_\_\_\_\_

Account holder's full name (note: you must be the account holder to appoint an Authorised Representative):

\_\_\_\_\_

**"I wish to appoint the following person as my Authorised Representative":**

**Your Authorised Representative's details**

Authorised Representative's full name:

\_\_\_\_\_

Authorised Representative's telephone number:

\_\_\_\_\_

Authorised Representative's email address (if applicable):

\_\_\_\_\_

Authorised Representative's physical address:

\_\_\_\_\_

Limitations of the Authorised Representative's rights (Specify anything that your Authorised Representative should NOT be allowed to do on your behalf. If left blank, the Authorised Representative has the power to act as if they were you.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Appointment declaration:**

“I, \_\_\_\_\_, authorise FibreMax® to deal with the above person as my Authorised Representative. I acknowledge that I am responsible for all acts of my Authorised Representative within the authority as described in this Appointment. FibreMax® may assume that it is dealing with the Authorised Representative if they identify themselves as such when contacted at any of the contact numbers/addresses above. This appointment continues until I revoke it in writing.”

**Signature:**

Place and date:

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Account holder’s signature:

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**Witness’s declaration and signature:**

“I confirm that the person signing above (account holder) has produced evidence of their identity.”

Place and date:

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Witness’s signature:

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Witness’s full name:

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Witness’s capacity (JP, police officer etc.) and address:

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*Please complete and email to [admin@fibremax.com.au](mailto:admin@fibremax.com.au).*

*Please contact us on 1300 757 013 if this proves too difficult or inconvenient for you, and we will work with you to find an alternative way of appointing an Authorised Representative.*