

Account Authority Request Form NON RESIDENTIAL

Postal address: PO Box 953

Caboolture Qld 4510

Customer Service Team:

Ph: 1300 086 489

customer.service@unitywater.com

Website:

www.unitywater.com

Terms and Conditions: In accordance with <u>Unitywater's Privacy Policy</u>, Unitywater can only discuss information with the property owner and their legally authorised representatives. The level of access given to an authorised representative depends on what the owner grants.

* INDICATES A MANDATORY FIELD. YOUR FORM WILL NOT BE PROCESSED IF ALL INFORMATION IS NOT PROVIDED

Account details:
Account Number*:
Account Name*:
Please provide the business/trust/entity etc name(s) of the registered property owner(s) as they appear on your Water and Sewerage Account.
Property address:
Street address*:
Suburb: Postcode:
My business is a*:
Company: Name ABN or ACN
Trust or Superannuation Fund: Name
Body Corporate, Sporting Entity, Charity: Name
Other: Name
Please include documentation that supports your request: Company: (If you have not previously) please provide a copy of the Company Extract, Company Constitution, or a Legal Document (such as ASIC document) that shows the roles of the authorising person.

Trust or Superannuation Fund: Trust Deed or document linking the person seeking authority to the SMSF.

Body Corporate: the BC Management Contract or Committee minutes indicating committee member roles or agreement for this authority to be applied to a particular person, or similar.

Sporting Entity or Charity: Committee minutes indicating committee member roles or agreement for this authority to be applied to a particular person, or similar.

Other: a legal document linking the authorised person to this Entity.



Account Authority Request Form NON RESIDENTIAL

Companies or Trust/Super F	unds with multiple properties / accounts in the same name:
I wish to link all my properti	es / accounts under the account name listed above
There are no other account	s
Do you own a residential pro	perty in your own personal name?* (required):
No	
Yes	
Please provide account num	ber for this property:
Add or remove authori	sed persons:
Account authorisation	
I would like to add an autho	rity on my account
I would like to remove selec	cted authorities (See section below)
I would like to remove all ex	xisting account authorities and add new authority/s.
Please note: it is the responsib	ility of the customer to update and/or remove Authorities.
For a list of all persons with au the 'My Details' tab.	thority on your account you can log in to My Account and check under
Removing authorised	person/s from my Unitywater account:
Remove this authorised pers	
First Name:	Last Name:
Remove this authorised pers	on 2:
First Name:	Last Name:



Account Authority Request Form NON RESIDENTIAL

Adding authorised person/s to my Unitywater account:

Levels of Authority

There are two levels of access which can be granted to authorised representatives - Account and Full.

Account Authority: Authority to review and discuss information contained in the account but not to amend or change the owner's account or personal information in any way. No private or personal information will be discussed or disclosed under this authority. No online access to My Account.

Full Authority: Authority to act on behalf of the property owner in all matters relating to the account. Able to review, discuss and change any information contained in the account, including personal information. Includes online access to My Account.

Authorised employee 1:			
First Name:	Last Name <u>:</u>		
Position:	Contact phone numb	er <u>:</u>	
Email:	Authority Level:	Full authority	Account access only
Authorised employee 2:			
First Name:	Last Name <u>:</u>		_
Position:	Contact phone numb	er <u>:</u>	
Acknowledgement: I acknowledge that the authorised re	Authority Level: epresentative/s I nominate herein will retain the contacting Unityway	in their level of acces	ss to my account until I
Acknowledgement: I acknowledge that the authorised renotify Unitywater that it is to be remove authority arrangements. Declaration I declare that all information provide misrepresented any responses or surfaceount Holder or as the authorised agreement and/or legal authority to I state this declaration is true and continuous continuous account Holder or as the authority to I state this declaration is true and continuous continuous account Holder or as the authority to I state this declaration is true and continuous continu	epresentative/s I nominate herein will reta	in their level of accest vater). It is my respo my knowledge and the It this information in noting on their behalf we provide false informer full extent permissil	es to my account until I nsibility to update and at I have not falsified or ny capacity as either the with their full knowledge, nation and that by agreeing ble at law for any and all loss
Acknowledgement: I acknowledge that the authorised renotify Unitywater that it is to be remove authority arrangements. Declaration I declare that all information provide misrepresented any responses or surfaceount Holder or as the authorised agreement and/or legal authority to I state this declaration is true and continuous continuous account Holder or as the authority to I state this declaration is true and continuous continuous account Holder or as the authority to I state this declaration is true and continuous continu	epresentative/s I nominate herein will retain oved (using this form or contacting Unityword is correct and complete to the best of mupporting documentation. I have provided representative of the Account Holder, and oso. I understand that it is an offence to crect, and that I indemnify Unitywater to the direct result of Unitywater acting in accord	in their level of accest vater). It is my respo my knowledge and the It this information in noting on their behalf we provide false informer full extent permissil	es to my account until I nsibility to update and at I have not falsified or ny capacity as either the with their full knowledge, nation and that by agreeing ble at law for any and all loss
Acknowledgement: I acknowledge that the authorised renotify Unitywater that it is to be remove authority arrangements. Declaration I declare that all information provide misrepresented any responses or surface Account Holder or as the authorised agreement and/or legal authority to I state this declaration is true and consuffered by the Account Holder as a Company director / chairperson in	epresentative/s I nominate herein will retain oved (using this form or contacting Unityword is correct and complete to the best of mupporting documentation. I have provided representative of the Account Holder, and oso. I understand that it is an offence to crect, and that I indemnify Unitywater to the direct result of Unitywater acting in accord	in their level of accest vater). It is my respond by knowledge and the digital this information in noting on their behalf we provide false information in the full extent permissilance with the information.	at I have not falsified or ny capacity as either the with their full knowledge, nation and that by agreeing ble at law for any and all loss ation I have provided.

Printed copies are uncontrolled.
Document No: F5976
Revision No: 10

or we have your permission in writing.

Page 3 of 3 Last Review Date: 26/07/2024 Next Review Date: 26/07/2025