



**Postal address:**

PO Box 953  
Caboolture Qld 4510

**Customer Service Team:**

Ph: 1300 086 489  
[customer.service@unitywater.com](mailto:customer.service@unitywater.com)

**Website:**

[www.unitywater.com](http://www.unitywater.com)

**Terms and Conditions:** In accordance with **Unitywater's Privacy Policy**, 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.



**Companies or Trust/Super Funds with multiple properties / accounts in the same name:**

I wish to link all my properties / accounts under the account name listed above

There are no other accounts

**Do you own a residential property in your own personal name?\* (required):**

No

Yes

Please provide account number for this property: \_\_\_\_\_

**Add or remove authorised persons:**

**Account authorisation**

I would like to add an authority on my account

I would like to remove selected authorities (See section below)

I would like to remove all existing account authorities and add new authority/s.

*Please note: it is the responsibility of the customer to update and/or remove Authorities.*

For a list of all persons with authority on your account you can log in to [My Account](#) and check under the 'My Details' tab.

**Removing authorised person/s from my Unitywater account:**

**Remove this authorised person 1:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

**Remove this authorised person 2:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_



## **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: \_\_\_\_\_

Position: \_\_\_\_\_ Contact phone number: \_\_\_\_\_

Email: \_\_\_\_\_ Authority Level:    Full authority    Account access only

### **Authorised employee 2:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Position: \_\_\_\_\_ Contact phone number: \_\_\_\_\_

Email: \_\_\_\_\_ Authority Level:    Full authority    Account access only

### **Acknowledgement:**

I acknowledge that the authorised representative/s I nominate herein will retain their level of access to my account until I notify Unitywater that it is to be removed (using this form or contacting Unitywater). It is my responsibility to update and remove authority arrangements.

### **Declaration**

I declare that all information provided is correct and complete to the best of my knowledge and that I have not falsified or misrepresented any responses or supporting documentation. I have provided this information in my capacity as either the Account Holder or as the authorised representative of the Account Holder, acting on their behalf with their full knowledge, agreement and/or legal authority to do so. I understand that it is an offence to provide false information and that by agreeing I state this declaration is true and correct, and that I indemnify Unitywater to the full extent permissible at law for any and all loss suffered by the Account Holder as a direct result of Unitywater acting in accordance with the information I have provided.

### **Company director / chairperson name:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

*Unitywater is collecting your personal information for the purpose of providing the requested service. The collection of this information is authorised under the South East Queensland Water (Distribution and Retail Restructuring) Act 2009. Your information will not be given to any other person or agency unless required by law or we have your permission in writing.*