

Authority to Act

Please return your completed form by mail to: Urban Utilities

GPO Box 2765, BRISBANE QLD 4001 or by email to: customerservice@urbanutilities.com.au

Privacy and why we collect your information: Your privacy is important to us. Urban Utilities is collecting your personal information as a distributor-retailer under the South-East Queensland Water (Distribution and Retail Restructuring) Act 2009 (Qld) for the purposes of processing the authority to act application. The personal information we collect may also be used to manage and make contact with you about accounts and to verify your identity in future; to contact you about network faults and emergencies and manage the water and sewerage services we provide; and to conduct customer research. Urban Utilities may use and/or disclose your personal information to its employees, agents or contractors for these purposes and to other third parties as otherwise required or authorised by law. For more on how we protect the personal information we collect, and to find out how to make a privacy complaint, access our Privacy Policy at **www.urbanutilities.com.au/privacy**

	* INDICATES A MANDATORY FIELD. FORMS WILL NOT BE PROCESSED IF ALL INFORMATION IS NOT PROVIDED CORRECTLY.					
	What is your relationship/role to the entity? *					
Director, Trustee, CEO, COO, CFO, CTO, Owner, or other equivalent roles						
	Others (specify) - see below: (e.g. General Manager, Financial Controller)					
	If you selected <i>Others</i> , please provide a reason, and attach supporting documentation to evidence you are authorised to complete this form.					
	You may authorise others once you have been authorised.					
	Due to our privacy obligations, we will be unable to process your form without this documentation.					
	Please include documentation/s validating your relationship/role to the entity with your request:					
	Company/Business: (If you have not previously) please provide a copy of the Company Extract, Company Constitution, Legal Document (such as ASIC document), or letter from Human Resources 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 Body Corporate Management Contract or Committee minutes indicating committee member roles or agreement for this authority to be applied to a particular person, or similar.					

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similar.

Legal document linking the authorised person/entity to this entity.

Sporting Entity or Charity:

Information provided in this section will only be used used to update existing details where applicable.	for the purposes of com	municating in regards	to this form, and it will not be
First Name	Last Name	Э	
Contact Number	Email		
Account Details * Information provided in this section will only be used used to update existing details where applicable.	for the purposes of com	municating in regards	to this form, and it will not be
Account Name: Please provide the account name as it appears on the Un	rban Utilities bill.		
Customer Reference Number: This is a 15-digit number and can be found on the top rig	ght-hand corner of the Un	ban Utilities bill.	
Contact Number	Email		
Property Address *			
This is for the property of the account above.			
Unit Number (if applicable) Street Number	Street Name		
Suburb		State	Postcode
Verification *			
To meet requirements, please select and answer ONE of	the verification questions	below.	
Method of most recent bill payment: (e.g. BPAY, At	•		<i>;)</i>
Property Lot and Plan: (e.g. L9/RP2357)			
(0.9. 20/11 200/)			
Settlement Date (date of last ownership change):	(e.g. 11 May 2023)		

2 Applicant's Details *

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6 Adding an Authorised Third Party to the Urban Utilities Account

An Authorised Third Party will have the authority to act on behalf of the property owner in all matters relating to the account. This includes the ability to access, review, discuss and change any information contained in the account for both financial and non-financial matters, including personal information and MyAccount.

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

I would like to add the following Authorised Third Party:

Authorised Person

lf

To add a third party, please complete all fields for at least one of either Person or Entity's details.

You can authorise your **professional representatives**, (e.g. Property Manager, Solicitor, etc) to act on your behalf through their agency. To allow this, complete the **Authorised Entity** section.

Information provided in this section will be used for the purposes of creating/updating account details where applicable.

First Name*			Last Name*		
Contact Number	*		Email*		
Relationship/Rol	e: (e.g. Family Member	; Personal Assistant)*	Duration*		
			Ongoing	End date:	
you wish to autho	rise more people, pl	ease complete the ta	ble below.		
irst Name:*	Last Name:*	Contact Number:*	Email:*	Relationship/Role:*	Ongoing/End Date:*

	h <mark>orised</mark> represe	-	authorised entity wil	l have auth	ority to act on t	nehalf of this acc	ount	
Any representative of this authorised entity will have auth Real Estate/Property Management Agency Body Corporate, Sporting Entity, Charity			Company/Business					
			Trust or Superannuation					
	Others:							
Enti	tu Tradir	ng or Dugingo	o Nomo*					
EIIU	ty, maun	ng or Busines	S Name					
Brai	nch (if a _l	oplicable)			ABN*			
Con	tact Nun	nber*			Email *			
Rela	ıtionship	/Role: <i>(e.g. Pr</i>	operty Manager, Accou	ıntant)*	Duration*			
					Ongoing	g End d	late:	
Unit	Numbe	r (if applicable)	Street Number*	Str	eet Name*			
Sub	urb*					State*		Postcode*
	_							
	_	_	uthorised Third Party uthority of the Proper	=				on this form.
				. ,	, o. a, a		9	
	Remove	all existing a	uthorised third parties	S.				
	Remove	selected exis	ting authorised third _l	party autho	rities – this opt	ion will remove o	nly those au	uthorised noted below.
lmp	ortant: 1	The Property	Owner(s) is responsib	le for upda	ting and/or rem	oving authorities		
Remove this Authorised Person								
	First Na	me*			Last Name*			

Continued on next page

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If you wish to remove more people, please complete the table below. First Name:* Last Name:* **Remove this Authorised Entity** Entity, Trading or Business Name* Branch (if applicable) ABN* **Declaration *** By signing below, I declare that I am the property owner for the Property Location recorded on this form and that I authorise the above mentioned Third Party to act on my behalf for all matters relating to my Urban Utilities' water and sewerage account, as detailed above OR I have provided documentation demonstrating authorisation to complete the form on the property owner's/ owners' behalf. I understand that in order to meet privacy requirements, all property owners and Authorised Third Parties must correctly answer a verification question each time they contact Urban Utilities to access, review, discuss and change information on an account. 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 Urban Utilities to the full extent permissible at law for any and all loss suffered by the property owner/owners as a direct result of Urban Utilities acting in accordance with the information I have provided. Signature **Full Name**

Please return the completed form and any supporting documents to either:

- 1. Email customerservice@urbanutilities.com.au with the subject heading 'ATA Application'; or
- Mail Urban Utilities GPO Box 2765, BRISBANE QLD 4001

Date