

## **Appointment of an Advocate or Authorised Representative**

Dear Customer,

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

- carefully read the important notes below;
- carefully **complete the form** on the next page;
- take it, with some proof of your identity, to a witness as indicated next;
- **sign it** in the presence of a lawyer or doctor or pharmacist or Centrelink officer or member of police as a witness; and
- post it to Suite 10/758 Blackburn Road, Clayton, VIC 3168
- email it to: support@oceandigi.com.au

## **Important Notes**

- 1. An 'Advocate' whom you appoint can deal with us on your behalf (including making a complaint) but:
  - (a) cannot change your account or services; and
  - (b) cannot act on your behalf or access your information unless you are present and agree.
- 2. An 'Authorised Representative' whom you appoint can deal with us on your behalf as your agent (including making a complaint) and:
  - (a) If you give them limited rights: has only those rights including any limitations you specify on access to your information; and
  - (b) otherwise: has power to act and access information as if they are you.
- 3. If we are not clear whether you intend to appoint an Advocate or an Authorised Representative, we shall assume you only intend to appoint an Advocate.
- 4. 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). We may need to have the documents checked before we can accept the appointment.
- 5. To protect your privacy and security and to minimise the risk of fraud, our normal requirement is that this Appointment be submitted by post as a signed original, witnessed by a lawyer or doctor or pharmacist or Centrelink officer or member of police.



## **Appointment of an Advocate or Authorised Representative**

Date:	
To: OceanDigi Pty Ltd	
My Account Number:	
Account Holder Name:	
Service Address:	
I wish to appoint (tick):	
☐ an <b>Advocate</b> or	
☐ an Authorised Represe	tative
The person I appoint is:	_
Their email address is:	
Their landline number is:	
Their mobile number is:	
Their physical address is:	<u> </u>
Limitation/s on authority of Authorised Representative:	
	Note: complete if applicable
My appointment and authority	
applicable). I acknowled on my behalf within the might otherwise have Appointment. You ma themselves as such who	with the above person as my Advocate or Authorised Representative (as ge responsibility for anything my Advocate or Authorised Representative does are authority as described in this Appointment. I release you from any claim I against you, based on anything you do in reasonable reliance on this assume that you are dealing with the relevant person if they identify a you contact any of the contact numbers / addresses above. The appointment it in writing. I confirm that this person is over the age of 18.
My Signature:	
Signature of witness:	



Name of witness:	
Qualification of witness:	Lawyer / Doctor / Pharmacist / Centrelink officer / Police  Note: circle qualification
Address of witness:	
Confirmation by witness: I	confirm that the person signing above has produced evidence of their identity.