



Appointment of Authorised Representative: Business

Use this form to appoint an authorised representative for your account(s).

Authority level: Full

- Description:
- Includes authority to receive any and all information about the account, create payment arrangements, authorise tariff changes and also open and close accounts on behalf of the account holder.
 - Does not include authority to add or remove another authorised representative, add a password to an account or refund or transfer a credit balance from an account.

Account holder

Your details:

Name:

Address:

Phone:

Date of birth:

Email:

Company or business details:

Name:

Address:

Phone:

ABN / ACN:

Email:

Account details

Account 1:

Account 2:

Account 3:

Account 4:

All past, current and future accounts? Yes No

Authorised representative

To appoint an individual:

Name:

Address:

Phone:

Date of birth:

Email:

To appoint a company or business:

Name:

Address:

Phone:

ABN / ACN:

Email:

Authorisation by account holder

The Account Holder:

1. appoints and authorises the Authorised Representative to act as the Account Holder's agent and representative in respect of the Account(s) with the Authority set out above;
2. acknowledges that if the Authorised Representative is a company or organisation, then any employee or representative of that company or organisation is authorised to act on behalf of the Authorised Representative under this appointment;
3. acknowledges that it will be bound by the actions of the Authorised Representative under this appointment;
4. acknowledges that Ergon Energy is not required to enquire into the circumstances or validity of this appointment or of any request or instruction given by the Authorised Representative in accordance with this appointment;
5. to the maximum extent permissible by law, releases and indemnifies Ergon Energy from any and all liability, loss or damage suffered or incurred as a result of Ergon Energy acting or relying on this appointment; and
6. acknowledges and agrees that this appointment continues unless and until the Account Holder or Authorised Representative notify Ergon Energy in writing of its cancellation.

Name:

Date:

Position title:
(if applicable)

Company:
(if applicable)

Signature:

Acceptance by authorised representative

The Authorised Representative:

1. accepts its appointment as agent and representative of the Account Holder on the terms set out above;
2. will act in accordance with the terms of the appointment and any direction given by the Account Holder;
3. will notify Ergon Energy immediately on the revocation of the appointment; and
4. to the maximum extent permissible by law, releases and indemnifies Ergon Energy from any and all liability, loss or damage suffered or incurred as a result of Ergon Energy acting or relying on the appointment.

Name:

Date:

Position title:
(if applicable)

Company:
(if applicable)

Signature:

Submitting your application

Return your completed form to:

Email: businesscustomerservice@ergon.com.au

Mail: Attn: Ergon Retail, PO Box 308, Rockhampton QLD 4700

Privacy notice

Ergon Energy is collecting personal information on this form for the purpose of establishing third party authority to access information relating to your account. If we are not provided with all or part of the information requested, we may not be able to set up and administer the third party authority. The information collected will not be disclosed by Ergon Retail to any third party without your consent, unless authorised or required by law or in accordance with the Privacy Act 1988 (Cth). It is your responsibility to inform the third party listed above that their personal information has been supplied to Ergon Retail and the purpose. Our Privacy Statement sets out how you may access and seek correction of your personal information or make a privacy related complaint. Our Privacy Statement and contact details are available at ergon.com.au.