

## Authority to access account information

With the changes to the Privacy Act we wish to offer you greater security of your personal information. We will not disclose your personal information to anyone other than in accordance with our Privacy Policy.

We will only talk about your account with the person listed as the account holder. If you want any other person (for example your spouse) to obtain personal information about your account or to make variations to your account please fill out the below form to nominate that person as your authorised representative.

I,   , authorise  
First Name Surname

1

### Full Name

Title First Name Surname

### Address

Unit No. Street No. Street Name Type (e.g. Cres)

Suburb State Post Code

Phone Number: (  )  Date of Birth:  /  /

2

### Full Name

Title First Name Surname

### Address

Unit No. Street No. Street Name Type (e.g. Cres)

Suburb State Post Code

Phone Number: (  )  Date of Birth:  /  /

3

### Full Name

Title First Name Surname

### Address

Unit No. Street No. Street Name Type (e.g. Cres)

Suburb State Post Code

Phone Number: (  )  Date of Birth:  /  /

to act on my behalf in relation to any service (eg telephony, mobiles, Internet) provided to me by Primus Telecom. I acknowledge that this authority includes the right to discuss any matters concerning my Primus Telecom account as well as the right to make variations to the account or to cancel it. I also acknowledge that it is my responsibility to cancel this authority.

Signature: \_\_\_\_\_ Date:  /  /

Customer Number:   Telephone No: (  )