

Complaint about alleged breach of privacy - Representative authority form

Please complete and sign this form if you are using a representative other than a lawyer to assist you with your complaint to us – for example, an advocate, a family member or friend.

This form confirms to us that your representative has your authority to act on your behalf and have access to information about you. You do not have to complete this form if you have appointed a lawyer as your representative as they are already authorised to act for you.

NOTE: If you are completing this form for someone else, you still need to get them to sign it.

This authority to act is for	my	Privacy Act complaint about the following agency:
I,		, give permission
and authorisation for the information concerning me		, give permission lowing person to act on my behalf and have access to any respect of my complaint:
My representative's detail	s	
Title	:	
First Name	:	
Surname	:	
Postal address	:	
Email	:	
Telephone number(s)	:	
Signed (by complainant)	:	
Date	:	