FORM

Authority to Act

To:
Energy and Water Ombudsman
PO Box Z5386
St Georges Terrace
PERTH WA 6831

I, _____ (full name)

of _____ (address)

authorise _____ (name of representative)

of _____ (address/business name)

to act on my behalf in relation to this complaint, and I authorise them to obtain the release of my energy/water accounts, records or documents which may assist in dealing with this complaint.

_____ _____

(Signature of Consumer) (Date)

The information above is private and confidential and is intended only for the individual or entity named above and may be privileged. If you are not the intended recipient, any dissemination, copying or use of the information is strictly prohibited. If you should receive this in error, please immediately telephone the Energy and Water Ombudsman's office and return the original form to the address below.

Energy & Water Ombudsman WA

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Call us 08 9220 7588 or Freecall 1800 754 004
Email us energyandwater@ombudsman.wa.gov.au
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