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Special request to add authorisation to account

Annual Site Location:

Name on Occupancy Agreement:

Address:

Mobile Contact: Registration number:

Authorisation start date Till (End date maximum of 6 months)

Signature of Occupant:

Authorisation:

Second authorisation name:

Address:

Mobile Contact: Registration number:

Contact After Hours / Business Hours:/.....

Email Address:.....

Driver's License attached: Tick box
(Please attach both sides)

Signature of authorised Occupant:

***By submitting this application, you are requesting that we add an additional person to have authorisation on your account to the individual whose name appears on this application for a certain period, the second authorisation will be the only contact that will be able to access sensitive information about your account for the time permitted due to special circumstances.**