Authorised Representative Nomination
Existing Customer Application

amnet BROADBAND

Great value. Great service.

Return to: **Fax:** (08) 6315 1891 **Email:** dslprov@amnet.com.au **Post:** Amnet Provisioning, GPO Box 2541, Perth WA 6001

Support: 1300 88 22 32
Mon-Fri: 6am-9pm
Sat-Sun-Pub: 8am-8pm

Please note: New Authorised contacts will have access to change account information including payment details, plan options, relocation of service, username/password information and purchase of DSL hardware.

Existing Customer

Full Name: _____ Business Name: _____

Title/Position: _____ Phone: (___) _____

Mobile: _____ Email: _____

Amnet Username: _____ Account №: _____

Existing Customer Authorisation

I hereby give authorisation to the person(s) below to request/perform changes to the account(s) detailed above:

Signature: _____

Signed by: _____ Date signed: _____/_____/_____

Authorised Representative Details

Person 1 | Access to: ☐ Account Information ☐ Update Payment Details ☐ Change DSL Plan ☐ Purchase Hardware

Full Name: _____ Business Name: _____

Title/Position: _____ Phone: (___) _____

Mobile: _____ Email: _____

Person 2 | Access to: ☐ Account Information ☐ Update Payment Details ☐ Change DSL Plan ☐ Purchase Hardware

Full Name: _____ Business Name: _____

Title/Position: _____ Phone: (___) _____

Mobile: _____ Email: _____

Authorised Representative Declaration

I/We have read, understood and agree to Amnet's Customer Relationship Agreement (available from www.amnet.com.au) and confirm that I/We are over the age of 18 and will be noted as an authorised account signatory.

Person 1 Signature: _____ Date signed: _____/_____/_____

Person 2 Signature: _____ Date signed: _____/_____/_____