



Third Party Rates Authority Form

Date:/...../.....

I/We.....
(Surname/Company) (Given Names) (If Company, include ABN)

give authority to
(Surname/Company) (Given Names) (If Company, include ABN and name of representative)

to enquire on, or act on our behalf with regards to, the following properties within the jurisdiction of the Mackay Regional Council Local Government Area:

(Please tick one below)

Assessment no.	Lot and Plan (if known)	Street Address (e.g. 10 Smith Street, Sometown)	Enquire ONLY	Act on behalf of:

Note: If more than five (5) properties, attach details on a separate page.

I/We acknowledge that the information provided below under “Third Party Verification Details” will be used by Mackay Regional Council staff to confirm the identity of the above-mentioned person/company before releasing any property or rating details.

Owner’s Details:

Residential or Company Address:.....

Postal Address:

Phone Numbers:

Email:.....

Third Party Verification Details (Compulsory information – authority will not be accepted if this section is not completed):

Security question:.....

Answer:.....

This Third Party Authority will remain in place until cancelled by property owner in writing or a transfer of ownership is received by council.

I/We understand and acknowledge by signing:

 Signature of property owner/s / Company Director

 Print name

 Signature of property owner/s / Company Director

 Print name

PRIVACY DISCLAIMER
Mackay Regional Council is collecting your personal information in order to process your application. This information will only be disclosed to any other third party with your written authorisation or as we are required by law.