

**AUTHORITY TO ACT**

Applicant Name(s): \_\_\_\_\_

Installation Address: \_\_\_\_\_

Authorised Person: \_\_\_\_\_

Relationship with  
Authorised Person: \_\_\_\_\_

Address of Authorised  
Person: \_\_\_\_\_

Contact Details (Applicant): Phone \_\_\_\_\_ Email \_\_\_\_\_

Contact Details (Authorised): Phone \_\_\_\_\_ Email \_\_\_\_\_

Authorisation Period: from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

I / we authorise the abovenamed to act on our behalf during the Authorisation Period in relation to the CONSORT Bruny Island Battery Trial (The Trial), including providing personal information about me / us relevant to The Trial, submitting and signing application forms and documentation on my / our behalf, and performing other functions as necessary to enable my / our application for or participation in The Trial as if the Authorised Person was me / us.

Signed: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please return completed form to:**  
CONSORT Bruny Island Battery Trial  
Reply Paid 83558, Moonah TAS 7009  
Email: [BrnyBattery@tasnetworks.com.au](mailto:BrnyBattery@tasnetworks.com.au)