



# AUTHORITY TO ACCESS INFORMATION

Use this form to give permission for a spouse, family member, financial adviser, accountant or other third party to access your information and documentation.

**Before you start...** Fill this form out in **BLOCK** letters using a **black or blue pen**. Write **'X'** to mark boxes.

- If you make a mistake when filling out the form, cross it out and initial the change.
- This authority doesn't allow anyone access to your online account. This information can only be provided to you.
- This authority will be valid for two years from the date you sign this form. After this, you'll need to complete a new authority.
- This authority won't be valid after you pass away.
- For your authority to be valid, make sure you complete the form in full, including signing the form in Section 5 and attaching a clear copy of your photo ID so we can verify your signature.

## 1. Your personal details

Mr Ms Mrs Miss Dr Other      Male Female      Member number

           

Full name       Date of birth (DD-MM-YYYY)  -  -

Residential address

Suburb       State         Postcode

Email

## 2. Authority for access

By ticking this box, I give authority for the persons specified on this form to access any information and documentation held by any institution on my behalf including super, pension, investments, insurances, medical information or other financial information and authorise any such institution to release such information and documentation to those persons.

Please indicate whether you wish to restrict the authorised person from accessing any particular information:

## 3. Authority for spouse, family member or other dependant

**I authorise that all information and documentation relating to my selection above can be released upon request, to:**

Full name

Date of birth for authorised person (DD-MM-YYYY)  -  -          Relationship to you

Password for authorised person/spouse to quote when retrieving information (for security reasons)

For **additional personal authorisations** you must complete another **Authority to release information** form.

**Turn over to finish filling out this form...**

#### 4a. Authority for financial adviser, accountant or other third party

Please fill out all sections that apply to your authorisation.

I authorise that all information and documentation relating to my selection above can be released upon request, to:

Full name

Representative of / Company name

Address

Email

Phone number (for authorised person)

ABN

Australian Financial Services (AFS) Licence number

Credit licence number

Tax practitioners board registration number

To authorise information and documentation to be released to additional people at the company listed above, please write their details in Section 4b.

#### 4b. Authority to release information includes the following additional people

**NOTE:** Additional authorisations are only valid for individuals associated with the information listed in Section 4a.

I authorise that all information and documentation relating to my selection in Section 2 can also be released, upon request, to:

Full name

Email

Role

Full name

Email

Role

Full name

Email

Role

Full name

Email

Role

Full name

Email

Role

If you require further authorisations, please include their details on an additional sheet and submit with this form.

**Please note:** this must be signed and dated by you (the member) to be accepted.

#### 5. Your declaration

 Please attach a copy of your photo ID (driver licence, passport, proof of age card).

Your signature

Date (DD-MM-YYYY)

Information provided to advisers should only be used for preparing financial planning services for you. Your information is handled in line with Australian Privacy Principles under the Privacy Act 1988. To find out more about the use and disclosure of your personal information visit [mine.com.au/your-privacy](http://mine.com.au/your-privacy)



**When complete return this form to us by:**

**Post** Mine Super  
Locked Bag 2020 Newcastle NSW 2300  
**Email** [help@mine.com.au](mailto:help@mine.com.au)

Locked Bag 2020 Newcastle NSW 2300 | T 13 64 63 | E [help@mine.com.au](mailto:help@mine.com.au) | [mine.com.au](http://mine.com.au)

Mine Superannuation Fund | ABN 16 457 520 308

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