

Energy Ombudsman Western Australia

Authority to Act Form EO2

To: Mr Chris Field
Energy Ombudsman
PO Box Z5386
St Georges Terrace
PERTH WA 6831
Freefax: 1800 611 279

I, _____ (full name)
located at _____ (address)
authorise _____ (name of agent)
of _____ to act on my behalf in relation to this
complaint and I authorise you to obtain the release of my energy accounts, records or
documents which may assist in dealing with this complaint.

(Signature of Consumer)

(Date)

The information above is private and confidential and is intended only for the individual or entity named above and may be privileged. If you are not the intended recipient, any dissemination, copying or use of the information is strictly prohibited. If you should receive this in error, please immediately telephone the Energy Ombudsman's office and return the original form to the address below.



Energy Ombudsman Western Australia

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