Third Party Authorisation

To: RENAULT FINANCIAL SERVICES

ABN 70 130 046 794 Australian Credit Licence Number 391464

Email: rfs_csc@renault.com.au Mail: Locked Bag Locked Bag 7000, Mount Waverley, Victoria 3149

Borrower Details

Borrower 1		**Borrower 2** ***(if applicable)***	
Full Name:		Full Name:	
Address:		Address:	
Preferred Ph:		Preferred Ph:	
Email:		Email:	

Authority

I/We authorise the below mentioned Authorised Individual or Organisation to act as my/our agent to:

- ► Seek and exchange **personal and / or account information** in connection with the below contract/s.
- ► Negotiate and enter into payment arrangements that are binding on me/us in connection with the below contracts.

Is there any limitation, restriction or expiry date you wish to place on the authority?

Limitations/Restrictions:
Expiry Date:

Authority applies to:

All contracts, please provide a Customer Number:	
Specific contract(s), please provide Loan Contract Number(s) or Vehicle Registration(s):	

Authorising an Individual *(Please complete all fields)*
Full Name:
Address:
DOB *(must be over 18):*
Phone:
Email:
Relationship:

Note: Certified ID will be required for individuals given authority to enter into payment arrangements

OR

Authorising an Organisation *(Please complete all fields)*
Organisation's Name:
Address:
Representative's Name:
Phone:
Email:
Password:
Extend this authority to all employees of this organisation Yes ☐ No ☐

Borrower/s Authority and Acknowledgement

By signing below I/we understand that:

- ► Standard account information (including account statements and other prescribed notices) can still be sent to me/us by Renault Financial Services;
- ► If an agreement is made, my/our written consent may be required;
- ► Renault Financial Services may rely on the information provided and the declaration and privacy consent previously provided by me/us to Renault Financial Services;
- ► This authority continues until the expiry date provided in the authority section of this document or when I/we revoke this authority by giving written notice to Renault Financial Services.

Borrower 1 Signature	Borrower 2 Signature (if applicable)
✕	✕
Date:	Date:

Authorised Third Party

I understand that my personal information is collected to facilitate this authority and that my authority may not be accepted if I do not provide all the information requested. For further information about how Renault Financial Services (RFS) collects, uses, discloses and stores personal information, how I can access and seek correction of my personal information or complain about the handling of my personal information, I can refer to the RFS privacy policy at www.renault.com.au/privacy-policy.

Signature
✕
Date: