



money

Australia Post



*4726 006

Appointment of a Power of Attorney (POA) Request Form

INSTRUCTIONS

Please read these instructions and the Identification Document Checklist below, then complete Sections 1-4 of this form.

To submit this request, you must take the following documents to a participating Australia Post outlet:

- this completed form
- your original ID documents (based on the Identification Document Checklist below)
- original or original certified copy of the Power of Attorney document
- if the donor has lost capacity to make their own decisions, an original medical certificate certifying this

IDENTIFICATION DOCUMENT CHECKLIST

The attorney must provide the following identification documents (ID).

PART A: ACCEPTABLE PRIMARY PHOTOGRAPHIC IDENTIFICATION DOCUMENTS

Select **ONE** document from this section. If you do not hold a document from this section, then provide documents from Part B or C.

Acceptable primary photographic identification documents

- A current and valid physical driver's licence (both front and back must be provided) issued by a State or Territory of Australia containing a photograph (digital driver's licences or renewal receipts cannot be accepted)
- A current and valid Australian passport or one that expired within the last two years
- A valid Australian Proof of Age or Proof of Identity card issued by a State or Territory containing a photograph of the person and date of birth or residential address

PART B: ACCEPTABLE PRIMARY NON-PHOTOGRAPHIC IDENTIFICATION DOCUMENTS

Should only be completed if you do not hold a document from Part A. You must present one primary non photographic document and one secondary identification document

Acceptable primary non photographic identification documents

Select **ONE** document from this section:

- Australian birth certificate issued by a State or Territory of Australia
- Australian citizenship certificate issued by the Commonwealth of Australia
- A current and valid physical Pension, Health Care or Seniors Health card issued by a State or Territory of Australia containing the name and date of birth or residential address (Department of Veterans Affairs Cards are not acceptable)

Secondary identification documents

Select **ONE** document from this section:

- Rates notice – a document issued by an Australian local government body
- Utility bill – a document issued by a utility provider, less than three months old from the date of issue, which contains the individual's name and residential address e.g. electricity bill, water bill, gas bill, telephone/internet bill
- A current and valid physical Australian Medicare card issued by the Australian Government

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PART C: ACCEPTABLE FOREIGN IDENTIFICATION DOCUMENTS*

Should only be completed if you do not hold a document from Part A and B.

Primary photographic foreign identification documents

Select **ONE** document from this section:

- A current and valid foreign driver's licence issued by a foreign government containing a photograph (international licence/ permit is not acceptable)
- A current and valid foreign passport issued by a foreign government, the United Nations or an agency of the United Nations containing a photograph and either the signature of the person or unique identifier (ID number)
- A current and valid ID card issued by a foreign government, the United Nations or an agency of the United Nations containing a photograph, and either a signature of the person or the unique identifier, and date of birth or residential address

OR

Primary non-photographic foreign identification documents

Select **ONE** document from this section plus **ONE secondary document** from **Part B**

- A foreign birth certificate issued by a foreign government, the United Nations or an agency of the United Nations
- A foreign citizenship certificate issued by a foreign government

***English translation services for foreign identification documents**

If primary photographic and primary non-photographic Identification documents are written in a language other than English, an accredited translation is required. This translation must be prepared by an Accredited Translator (search www.naati.com.au for certified translator) in Australia, or performed to a standard comparable to the Australian NAATI accreditation.

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SECTION 1: Account Holder Details

| | | |
|--|---------------------------|------------------------|
| Title | First Name | Middle Name (Optional) |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Surname | | |
| <input type="text"/> | | |
| Date of Birth (DD/MM/YYYY) | Account Number (Optional) | |
| / / | <input type="text"/> | |
| Residential Address including country (PO Box is not acceptable) | | |
| Unit | Street Number | Street Name |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Suburb/Town | State | Postcode |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Mobile Number | Email Address | |
| <input type="text"/> | <input type="text"/> | |

SECTION 2: Details of the Attorney/Person Requesting Access

Personal details

| | | |
|--|----------------------|------------------------|
| Title | First Name | Middle Name (Optional) |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Surname | | |
| <input type="text"/> | | |
| Do you have a prior legal name? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| If yes, prior legal name | | |
| Title | First Name | Middle Name (Optional) |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Surname | | |
| <input type="text"/> | | |
| Date of Birth (DD/MM/YYYY) | Gender | Email Address |
| / / | <input type="text"/> | <input type="text"/> |
| Phone Number (if mobile number is not available and including Country Code) | | |
| <input type="text"/> | | |
| Home Address including country (PO Box is not acceptable) | | |
| Unit | Street Number | Street Name |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Suburb/Town | State | Postcode |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Postal Address (if same as Home Address leave blank) | | |
| Unit | Street Number | Street Name |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Suburb/Town | State | Postcode |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Citizenship

Are you an Australian Citizen? Yes No

Other countries you are citizen of (Please list all the countries)

Employment details

| | |
|----------------------|----------------------------------|
| Employment Status | Primary Occupation (if employed) |
| <input type="text"/> | <input type="text"/> |

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