

# Macquarie Leasing

## Letter of Authority



Please enter the required information in the boxes provided. Once this form is submitted, please allow up to 24 hours for the contract(s) to be updated.

### Client details (please print in capital letters and you must provide at least one contract, registration, application or VIN number)

Client's full name

Loan contract number

Registration, Application, VIN and/or other contract number(s)

Does this apply to all of your existing Macquarie contracts?  Yes  No

### Person/Entity to be authorised

Full name/Entity name

Phone number  Date of birth (individuals only)

Relationship to client

Contact email

Select level of authority\*  Full authority  Payout only  Payment info

\*Levels of Authority (you may select more than one level of authority)

Full Authority	Payout only	Payment info
Full authority will grant access to all personal and account information and allow the authorised person to negotiate and agree on your behalf. Furthermore, the authorised party will be allowed to incur fees on your behalf.	This will allow the party to obtain payout information only which includes: residual, balloon or payout due dates and amounts only.	This will allow the authorised party to obtain information relating to the frequency, due dates, amounts of repayments and end of finance payments.

I/We, hereby authorise Macquarie Leasing Pty Ltd to grant access to the above mentioned person(s)/entity(s) information requested in relation to me/us and all of my/our contracts and accounts at the level of authority indicated above.

I/We understand that by authorising the nominated person(s)/entity(s) they will also have access to my personal and financial information. The authorised person(s)/entity(s) acknowledge that they must verify their identity each time they wish to discuss my/our contracts and accounts or otherwise require access to account information relating to such contracts and accounts.

Client's full name <input type="text"/>	Date <input type="text"/> <input type="text"/> <input type="text"/>	Client's full name <input type="text"/>	Date <input type="text"/> <input type="text"/> <input type="text"/>
Signature <small>(must be signed by hand and not electronically)</small> <input type="text"/>		Signature <small>(must be signed by hand and not electronically)</small> <input type="text"/>	

**Return this form using one of the below methods. For assistance please call customer service on 1300 368 908.**

PO Box H94, Australia Square NSW 1215 | F 02 8232 8977 | E leasingcustomerservice@macquarie.com

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