

Authority to act form

NT Concession Scheme and NT Seniors Recognition Scheme

Before you fill in the form

Only one person or organisation can be nominated to enquire or act on your behalf.

Authority to enquire, will limit the authorised person/organisation to enquire about the member's application, eligibility, payments and status of application/payments. The member will not be required to be present when the person/organisation is making enquiries on the member's behalf.

Authority to act will allow the authorised person/organisation to update the members' record, complete forms/declarations on the member's behalf and change member's payment details. The member will not be required to be present when the person/organisation is acting on the member's behalf.

Print clearly using BLOCK LETTERS in the space provided.

Fields marked with an asterisk (*) are required.			
Your details			
Full name*			
Member number*		Date of birth*	
Residential address*			
Postal address* (if different)			
Phone number*			
Extent of authority			
I authorise the below person or organisation to (mark X in one)*	make enquires about my member application, eligibility, payments and status of application/payments for the NT Concession Scheme or NT Seniors Recognition Scheme		
	act on my behalf and update my members' record, complete forms/declarations on by behalf and change my payment details		
Person authorised to act/enquire on my behalf details (optional)			
Full name			
Date of birth			

Residential address					
Postal address (if different)					
Email address			Phone		
Relationship (mark X in one)	Spouse		Parent or guardian		Sibling
	Child		Friend		Other
	If other, specify:				
Organisation authorised to act/enquire on my behalf details (optional)					
Organisation name					
ABN					
Office address					
Postal address (if different)					
Contact person name					
Email address			Phone		
Statutory declaration of member					
I (insert name)			solemnly and sincerely declare as follows:		
<ol style="list-style-type: none"> 1. that the information I have provided in this form is complete and correct; 2. that I authorise the individual/organisation named in the form to enquire or act on by behalf as indicated in this form until I advise otherwise; 3. that I understand that the authority is voluntary, I can cancel it at any time; and 4. this declaration is true in every particular and I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 119 of the <i>Criminal Code Act 1983</i>¹; 					
*By completing the information below, you are making a statutory declaration under the <i>Oaths, Affidavits and Declarations Act 2010</i> ² .					
Signature					

¹ <https://legislation.nt.gov.au/en/Legislation/CRIMINAL-CODE-ACT-1983>

² <https://legislation.nt.gov.au/en/Legislation/OATHS-AFFIDAVITS-AND-DECLARATIONS-ACT-2010>

Declaration is made at			
Full name of witness			
Witness address or phone number			
Witness signature		Date	
Statutory declaration of person or organisation authorised to enquire/act			
I (insert name)		solemnly and sincerely declare as follows:	
1. that I understand I have been authorised to (mark X in one of the below boxes):			
	make enquires about members' application, eligibility, payments and status of application/payments for the NT Concession Scheme or NT Seniors Recognition Scheme;		
	act on member's behalf, update their record, complete forms/declaration and change their payment details;		
2. that I witnessed the above named member complete their statutory declaration; 3. that I checked their understanding of what this form is for; 4. that the named member who granted me authorisation to enquire/act on their behalf has capacity and freely consented to making the authorisation; 5. this declaration is true in every particular and I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under s 119 of the <i>Criminal Code Act 1983</i> (NT); and 6. I understand that Territory Families will use and store my personal information in accordance with the <i>Information Act 2002</i> (NT) ³ .			
*By completing the information below, you are agreeing to make an unattested statutory declaration under the <i>Oaths, Affidavits and Declarations Act 2010</i> (NT).			
Declaration is made at			
Address or phone number			
Signature		Date	

³ <https://legislation.nt.gov.au/en/Legislation/INFORMATION-ACT-2002>

How to submit

Submit your completed form by email to ntconcessionandrecognition@nt.gov.au, in person at a Territory Families, Housing and Communities shopfronts or via post to the NT Concession and Recognition Unit PO Box 37037 Winnellie NT 0821.

More information

More about the Schemes and how we manage your information can be found on our website www.ntconcessions.nt.gov.au

To **cancel** an authority granted to a person or organisation to act or enquire on your behalf, use the above contact information or call the hotline on 1800 777 70.