## LPA THIRD PARTY AUTHORISATION FORM





**Disclaimer:** This form must be provided to Integrity Systems Company Ltd in accordance with the LPA Rules & Standards published at <a href="https://www.integritysystems.com.au">www.integritysystems.com.au</a>. Both parties signing this form declare that the information provided is true and correct. It is the Third Party's responsibility to check that the information has been recorded accurately on the LPA database. Please allow up to (7) seven business days to receive confirmation that this form has been processed. Otherwise, please call the Customer Service team on 1800 683 111 (Monday – Friday, 8am to 7pm AEDT) or email LPA@integritysystems.com.au.

<b>PRODUCER:</b> STRICTLY to be filled with the details of the producer to whom the PIC is officially registered		
Property Identification Code (PIC):		
Legal Name:		
(to whom the PIC is registered)		
Business or Trading Name:		
Business address:		
(street, suburb, state, postcode)		
Postal address:		
Mobile number:		Telephone:
Email:		
From the date of this authorisation, until it is revoked by me in writing, I authorise the Third Party named below to		
have LPA access to my PIC in accordance with the selected option below: Please select ONLY ONE below:		
Requires shared access to my existing LPA account		
If choosing this option, please provide LPA User ID:		
*suitable for adding family members or farm managers to assist with the LPA management		
*NO new LPA account will be created		
Requires their own LPA account to be created on my PIC		
*suitable for giving Agisting parties authority to have their own LPA Account on your PIC		
*seeking their own LPA Accreditation, new LPA account with a unique User ID will be created		
I acknowledge that I am responsible for any act or omission of the Third Party in connection with this authorisation		
Your name:		Signature:
Date:		
THIRD PARTY: To be filled with the details of the person who is requesting access to the producer's PIC		
Legal Name:		
(person seeking authorisation)		
Business or Trading Name:		
Business address:		
(street, suburb, state, postcode)		
Postal address:		
Mobile number:		Telephone:
Email:		•
Relationship to the PIC owner:	☐ Family ☐ Agent	☐ Other:
•	☐ Employee ☐ Business associate	e
I unconditionally and irrevocably indemnify Integrity Systems Company Ltd against all losses, damages, costs,		
charges, liabilities, and expenses which it may suffer or incur at any time arising from any act or omission in connection with this request. (*Third Party person must be of Legal age)		
connection with this request. ( Third Furty person must be of Legal age)		
☐ I confirm to be 18 years old or over at the time of signing this document		
Your name:		Signature:
Date:		

**Collection Notice**: ISC requests this information to allow us to authorise you to transact within LPA. The information will only be used to verify your identity. By providing your personal information, you consent to the collection and handling of this information in accordance with ISC's privacy policy published at <a href="https://www.integritysystems.com.au">www.integritysystems.com.au</a>. You may access & correct any personal information held by us by contacting us at <a href="https://www.integritysystems.com.au">LPA@integritysystems.com.au</a>. Providing the requested information is not required by law. If you choose not to provide your information, we will not be able to provide you access to the requested LPA account.