

Authority for Third Party to Provide and/or Access Your Personal and Credit Information

Please complete this form if you wish to authorise a third party to provide personal and credit information about you and/or access personal and credit information about you which is held by Mazda Finance.

ACCOUNT HOLDER'S DETAILS

Name of account holder

Address

Postcode

Account number

The account holder authorises the person named as the Authorised Person below to:

- act as my/our agent in providing personal and credit information about me/us and/or seeking access to personal and credit information about me/us which is held by Mazda Finance; and
- incur fees on my/our behalf (which will be charged to my/our account) when requesting from Mazda Finance information in writing, a document or a copy of a document about me/us or my/our account.

AUTHORISED PERSON'S DETAILS

Name of authorised person

Date of birth

 / /

Address

Postcode

Relationship to the account holder

Contact phone number

Email address

DECLARATION AND SIGNATURE

Mazda Finance only uses your personal and credit information in accordance with the *Privacy Act 1988*, the Mazda Finance Privacy Policy and the "Privacy Statement and Consent" form which you signed when you applied for credit with Mazda Finance. You can view the Mazda Finance Privacy Policy at mfonline.com.au.

You may revoke this Authority at any time by notifying Mazda Finance.

This Authority does not permit the Authorised Person to establish a direct debit arrangement with Mazda Finance or in any way make payments to Mazda Finance by direct debit in respect of your Mazda Finance account. If you wish to limit the types of personal and credit information that Mazda Finance can disclose to the Authorised Person, please notify Mazda Finance in writing of the information that you do not wish Mazda Finance to disclose to the Authorised Person.

If you have any questions about this document please contact our National Customer Solutions Centre on **138 500**.

Account Holder's signature

Date

 / /

Authorised Person's signature

Date

 / /

Please return the completed form to: Mazda Finance Customer Solutions Centre, PO Box 1354, Macquarie Centre NSW 2113

T 138 500 E finance@mazdafinance.com.au