



## Authority to Act

Resident Name **Graham Gough**

Unit # **Unit 11**

Street Address **2 Serenity Close Noosa Heads QLD 4567**

By signing this form, you authorise Apex Energy Networks to act on your behalf regarding your electricity.

When you appoint Apex Energy Networks to act on your behalf, we may:

- Seek information from the network provider regarding your home electricity,
- Provide information to the network provider about your home electricity,
- Deal with the network provider as though they were dealing with you,
- Deal with the electricity retailer as though they were dealing with you.

I hereby authorise **APEX ENERGY NETWORKS** to act on my behalf

Executed by:

Signature

Name

Date signed

Current Retailer **Q Energy**

Phone Number **0418 357 169**

NMI **QB108597641**

Email **graham@goughpartners.com.au**

Account Number **EW862345**