



Appointment of a Power of Attorney (POA) Request Form

INSTRUCTIONS

Please read these instructions and the Identification Document Checklist below, then complete Sections 1-4 of this form.

To submit this request, you must take the following documents to a participating Australia Post outlet:

- this completed form
- your original ID documents (based on the Identification Document Checklist below)
- original or original certified copy of the Power of Attorney document
- if the donor has lost capacity to make their own decisions, an original medical certificate certifying this

IDENTIFICATION DOCUMENT CHECKLIST

The attorney must provide the following identification documents (ID).

PART A: ACCEPTABLE PRIMARY PHOTOGRAPHIC IDENTIFICATION DOCUMENTS

Select **ONE** document from this section. If you do not hold a document from this section, then provide documents from Part B or C.

Acceptable primary photographic identification documents

- A current and valid physical driver's licence (both front and back must be provided) issued by a State or Territory of Australia containing a photograph (digital driver's licences or renewal receipts cannot be accepted)
- A current and valid Australian passport or one that expired within the last two years
- A valid Australian Proof of Age or Proof of Identity card issued by a State or Territory containing a photograph of the person and date of birth or residential address

PART B: ACCEPTABLE PRIMARY NON-PHOTOGRAPHIC IDENTIFICATION DOCUMENTS

Should only be completed if you do not hold a document from Part A. You must present one primary non photographic document and one secondary identification document

Acceptable primary non photographic identification documents

Select **ONE** document from this section:

- Australian birth certificate issued by a State or Territory of Australia
- Australian citizenship certificate issued by the Commonwealth of Australia
- A current and valid physical Pension, Health Care or Seniors Health card issued by a State or Territory of Australia containing the name and date of birth or residential address (Department of Veterans Affairs Cards are not acceptable)

Secondary identification documents

Select **ONE** document from this section:

- Rates notice – a document issued by an Australian local government body
- Utility bill – a document issued by a utility provider, less than three months old from the date of issue, which contains the individual's name and residential address e.g. electricity bill, water bill, gas bill, telephone/internet bill
- A current and valid physical Australian Medicare card issued by the Australian Government

PART C: ACCEPTABLE FOREIGN IDENTIFICATION DOCUMENTS*

Should only be completed if you do not hold a document from Part A and B.

Primary photographic foreign identification documents

Select **ONE** document from this section:

- A current and valid foreign driver's licence issued by a foreign government containing a photograph (international licence/permit is not acceptable)
- A current and valid foreign passport issued by a foreign government, the United Nations or an agency of the United Nations containing a photograph and either the signature of the person or unique identifier (ID number)
- A current and valid ID card issued by a foreign government, the United Nations or an agency of the United Nations containing a photograph, and either a signature of the person or the unique identifier, and date of birth or residential address

OR

Primary non-photographic foreign identification documents

Select **ONE** document from this section plus **ONE secondary document** from **Part B**

- A foreign birth certificate issued by a foreign government, the United Nations or an agency of the United Nations
- A foreign citizenship certificate issued by a foreign government

*English translation services for foreign identification documents

If primary photographic and primary non-photographic Identification documents are written in a language other than English, an accredited translation is required. This translation must be prepared by an Accredited Translator (search www.naati.com.au for certified translator) in Australia, or performed to a standard comparable to the Australian NAATI accreditation.

Bank of Queensland Limited ABN 32 009 656 740, Australian Credit Licence 244616 ("BOQ"), promotes and distributes the Bank of Queensland Credit Cards ("Credit Cards"). National Australia Bank Limited ABN 12 004 044 937 Australian Credit Licence 230686 ("NAB") is the credit provider and issuer of the Credit Cards. Our/us/we/The BOQ Credit Cards Team means NAB. BOQ does not and will not guarantee or otherwise support NAB's obligations under the contracts or agreements connected with the Credit Cards.

NAB is collecting your personal information through its agent, Australia Post, to verify your identity as required by Australian law. Australia Post will forward your personal information to NAB who will handle it in accordance with the relevant product terms and conditions. Further information about NAB's handling of personal information is contained in the [NAB Privacy Policy](#). The policy also contains information about how to make an access or correction request or lodge a privacy-related complaint.

SECTION 1: Account Holder Details

Title	First Name	Middle Name (Optional)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Surname			
<input type="text"/>			
Date of Birth (DD/MM/YYYY)	Account Number (Optional)		
/ /	<input type="text"/>		
Residential Address including country (PO Box is not acceptable)			
Unit	Street Number	Street Name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb/Town	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mobile Number	Email Address		
<input type="text"/>	<input type="text"/>		

SECTION 2: Details of the Attorney/Person Requesting Access

Personal details

Title	First Name	Middle Name (Optional)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Surname			
<input type="text"/>			
Do you have a prior legal name?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, prior legal name			
Title	First Name	Middle Name (Optional)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Surname			
<input type="text"/>			
Date of Birth (DD/MM/YYYY)	Gender	Email Address	
/ /	<input type="text"/>	<input type="text"/>	
Mobile Number (including Country Code)		Phone Number (if mobile number is not available and including Country Code)	
<input type="text"/>		<input type="text"/>	
Home Address including country (PO Box is not acceptable)			
Unit	Street Number	Street Name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb/Town	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Postal Address (if same as Home Address leave blank)			
Unit	Street Number	Street Name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb/Town	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Citizenship

Are you an Australian Citizen? Yes No

Other countries you are citizen of (Please list all the countries)

Employment details

Employment Status	Primary Occupation (if employed)
<input type="text"/>	<input type="text"/>

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