Data Access Authority Form

TNZ Group Limited

Dear Customer,

We require authorisation to access your private data hosted by TNZ Group. This data access is required to perform an essential or non-essential service to you, as requested by you.
Complete this authority form to permit access to private or non-private data.

Name of Applicant *(full legal name of organisation)*

TNZ Account Code *(if you aren't sure, leave this blank)*
#

Contact Name and Telephone Number

( )

Reason for Access

Justification for Access

Terms of Data Access:

In consideration of TNZ Group Limited agreeing to perform a service, I hereby agree with the following terms:

I/We acknowledge that the data contained may be confidential.

I/We confirm that I/We have authority to provide TNZ Group Limited, its employees, agents, contractors and representatives, with access to any required data and I/We wish to allow such access.

Signature

Name of Signatory

Date Signed