

Email completed and signed form to support@integritysystems.com.au or Fax to (02) 9463 9136

This form must be provided to Integrity Systems Company (ISC) in accordance with the **NLIS** Terms of Use and/or the **LPA's** Rules and Standards. You can view these at www.nlis.com.au or www.mla.com.au/lpa or call the Helpdesk on 1800 654 743. Both parties signing this form declare the information provided is accurate and complete. It is the third party's responsibility to check that the information has been recorded accurately on the database. If they do not receive confirmation within 10 days that it has been processed, please call 1800 654 743.

Completed by the PRODUCER to whom the PIC is registered. By signing this Form you authorise your PIC to be used by the person named below, for the purpose of accessing, recording and retrieving information for your PIC or to use an NVD. This authorisation is effective from the date below until revoked by Producer in writing.

Information to be provided:	Please write the details in BLOCK letters below.								
Property Identification Code (of the producer):	<table border="1" style="width:100%; height:20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>								
Legal name of person to whom the PIC is registered:									
Business or trading name:									
Postal address:									
Suburb/Town:									
State and Postcode:	<table border="1" style="width:100%; height:20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>								
E-mail address:									
Telephone and/or mobile numbers:									
On the basis that the Third Party below <input type="checkbox"/> acts on my behalf or <input type="checkbox"/> owns or manages livestock on my property <input type="checkbox"/> for NLIS purposes <input type="checkbox"/> for LPA purposes (Livestock Production Assurance and the use of NVDs) (Tick at least one of the boxes above)	I acknowledge I am responsible for any act or omission of the Third Party in connection with this authorisation. Your name: _____ (printed) Signature: _____ Date: ____ / ____ / _____								

Third Party: to be completed by the person requesting access to the PIC above.

Information to be provided	Please write the details in BLOCK letters below.								
Legal name of person seeking authorisation:									
Business or trading name:									
Postal address:									
Suburb/Town:									
State and Postcode:	<table border="1" style="width:100%; height:20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>								
Telephone and/or mobile numbers:									
E-mail address:									
The NLIS Database User ID of the Third Party. (Only complete this if giving access to NLIS.)	<table border="1" style="width:100%; height:20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>								

I unconditionally and irrevocably indemnify Integrity System Company against all losses, damages, costs, charges, liabilities and expenses which it may suffer or incur at any time because of any act or omission in connection with this request.

Signature:

Date: ____ / ____ / _____