

Third Party Authorisation

Please complete this and send it back to Volkswagen Financial Services Customer Service at customer_service@vwfs.com.au or Locked Bag 4002, Chullora NSW 2190

Third Party Authorisation Complete this section to authorise a Third Party Authorisation for your account.

Credit Provider: Volkswagen Financial Services Australia Pty Limited, Level 1, 24 Muir Road, Chullora NSW 2190 ('VWFSA')

I/We _____, authorise the nominated third party listed below to act on my behalf in relation to my finance loan account.

Borrower Details

Contract Number: _____

Full Name/s: _____

Date of Birth: _____ Contact Number: _____

Authorised Third Party Details

Name/Organisation: _____

Relationship to borrower: _____ Contact number: _____

Email address: _____

Acknowledgement and consent

Option 1 Information-Only Authority.

The authorised third party may:

- Receive information about my account, including balances, statements, and transaction history
- Make enquiries and request copies of account documents

The authorised third party may not:

- Negotiate repayment arrangements
- Receive notices, arrears contact etc
- Provide instructions or agree to changes to my loan

Option 2 Communication Authority.

The authorised third party may:

- Act as the primary point of contact for all account correspondence
- Communicate with the lender on my behalf regarding all account matters, including arrears and hardship
- Receive notices and correspondence relating to my account
- Act on my behalf in relation to all matters concerning my finance loan
- Negotiate, accept, and enter into repayment arrangements, hardship agreements, and loan variations
- Receive and respond to default, enforcement, or recovery notices
- deal with matters relating to vehicle recovery,
- insurance claims,
- sale of secured asset and
- post-repossession matters.

The authorised party may not

- Transfer ownership of the asset
- Act outside the scope of the loan agreement or law

Option 3 Sole Contact/Vulnerable

The authorised third party may:

- Act for me in all financial, contractual, and account related matters concerning this loan
- Be the sole point of contact in relation to this account

When this option applies

This authority applies where the customer is **unable to act on their own behalf**, including but not limited to circumstances such as:

- Incarceration or detention
- Hospitalisation
- Medical incapacity, unconsciousness, or cognitive impairment

The authorised third party must hold **legal authority** to act for the customer. Supporting documentation may be requested, including a Power of Attorney, guardianship or financial management order, or court order.

I consent to the lender communicating directly with the authorised third party in relation to all matters within the scope selected above, including account management, arrears, hardship assistance and dispute resolution (if applicable).

I acknowledge that should the nominated person not act in my best interest or not maintain contact with VWFS, contact will continue with myself.

I confirm that I have given this authorisation voluntarily and understand that the authority will remain active until it is withdrawn by providing written notice.

Borrower 1

Name

Signature

Date

Borrower 2

Name

Signature

Date