



# Buyer Appointment of Agent Form

If you are not available to attend your Block Purchasing Appointment, you may appoint someone (as your agent) to attend your Block Purchasing Appointment on your behalf. You may appoint an agent by completing, signing, and having your agent sign this Buyer Appointment of Agent Form. The original signed Buyer of Appointment of Agent Form must be provided by your agent to the Suburban Land Agency (SLA) representative at your Block Purchasing Appointment.

Please note, SLA treats your right to privacy seriously and all personal information collected is held in accordance with the requirements of the Information Privacy Act 2014 (ACT) and SLA's Privacy Policy, which is available on SLA's website.

**A certified copy of your Identification Documents must accompany this Form.**

All required fields in this Form must be completed in BLOCK LETTERS.

## If the Buyer is an Individual

Buyer 1 – Please state your full name, including any middle names

Title  First name

Middle name

Last name

Address

State  Postcode

**Identification Document - Office Use Only – A certified copy must accompany this form.**

Driver's licence Number; or  State

Other (Passport or Proof of Age Card)

Buyer 2 – Please state your full name, including any middle names

Title  First name

Middle name

Last name

Address

State  Postcode

**Identification Document - Office Use Only – A certified copy must accompany this form.**

Driver's licence Number; or  State

Other (Passport or Proof of Age Card)

We acknowledge the Ngunnawal people as traditional Custodians of the ACT and recognise any other people or families with connection to the lands of the ACT and region. We acknowledge and respect their continuing culture and the contribution they make to the life of this city and this region.



**ACT**  
Government

**Suburban Land**  
Agency

**If the Buyer is a Company:**

Company Name

ACN

**Director/Secretary** – Please state your full name, including any middle names

Title  First name

Middle name

Last name

Address   
 State  Postcode

**Identification Document - Office Use Only** – A certified copy must accompany this form.

Driver's licence Number; or  State

Other (Passport or Proof of Age Card)

**Director\*** – Please state your full name, including any middle names

(\*if the Buyer is a sole director/secretary company, this section can be left blank)

Title  First name

Middle name

Last name

Address   
 State  Postcode

**Identification Document - Office Use Only** – A certified copy must accompany this form.

Driver's licence Number; or  State

Other (Passport or Proof of Age Card)





**ACT**  
Government

**Suburban Land**  
Agency

## Execution by Buyer

I/We declare that:

1. the information contained in this Buyer Appointment of Agent Form is accurate and complete in all respects; and
2. by signing this Form:
  - (a) I/We acknowledge that, we have received, read, and understood the SLA Privacy Policy and accept that any information collected by SLA pursuant to the sale of land is held and used in accordance with the SLA Privacy Policy;
  - (b) I/We consent to SLA's use of any personal information provided by us to fulfil the purpose of this Form and the subsequent contract for the sale of the Property, and any of its functions, including but not limited to disclosure of personal information to the ACT Revenue Office and other relevant Authorities, and to the solicitors acting for the SLA; and
  - (c) I/We, to the extent SLA has complied with the SLA Privacy Policy, releases the SLA from any claim and/ or liability arising from the improper use of our information by a third party following the provision of our information by the SLA as contemplated above.

### If the Buyer is an Individual

Signature of Buyer 1		Date							
----------------------	--	------	--	--	--	--	--	--	--

Signature of Buyer 2		Date							
----------------------	--	------	--	--	--	--	--	--	--

Signature of Agent		Date							
--------------------	--	------	--	--	--	--	--	--	--

### If the Buyer is a Company

Signature of Director/Secretary		Date							
------------------------------------	--	------	--	--	--	--	--	--	--

Signature of Director		Date							
-----------------------	--	------	--	--	--	--	--	--	--