

## Authorisation form to re-issue Domain Password

Today's Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Domain Name \_\_\_\_\_

Organisation \_\_\_\_\_  
(NB: This must exactly match the organisation name listed in the registrar's whois service for this domain)

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_  
(the Domain Password will be sent here)

Fax Number \_\_\_\_\_  
(only required if no current email address is available)

## Warranty and Authorisation

I hereby request and authorise Sublime IP Pty Ltd to re-issue the Domain Password for the above listed Domain Name. As the License Holder I warrant that I am authorised to request the Domain Password as, or on behalf of, the license holder. I agree that Sublime IP Pty Ltd is not responsible for any demand which may be made against me or Sublime IP Pty Ltd by any party as a result of the issue of this Domain Password and I agree to hold harmless and release Sublime IP Pty Ltd from and against any claims.

Signed: \_\_\_\_\_ Name (Print): \_\_\_\_\_

If you are not the currently listed contact person for this domain you need to complete this section:

If you are not the current Registrant Contact for this Domain Name and wish to have the Registry Key sent to you, you must hold the position of Owner of the organisation / Licence Holder or its Chief Executive Officer (CEO), Chief Operating Officer (COO), Managing Director, General Manager, Company Director, Company Secretary, Financial Controller or Chief Financial Officer (CFO). No other positions will be accepted.

Signatory's (Principal's) Position: \_\_\_\_\_

Witnessed By (Signature): \_\_\_\_\_

Name of Witness (Print): \_\_\_\_\_

Address of Witness: \_\_\_\_\_

