



**APRA
AMCOS**

LETTER OF AUTHORITY

Membership enquiries 0800 69 2772 nz@apra.co.nz www.apraamcos.co.nz

Please use this form to authorise your manager(s), business associates, or other trusted individuals to have access and/or receive documents relating to your membership information. You can elect for an authorised individual or individuals to access, receive or be copied on your membership correspondence. You may grant one of three levels of access to your membership: 'Full Access', is the most comprehensive level of access; while 'Claim and Register' and 'Financial' access grants a specific level of access to your APRA AMCOS membership.

If you have any questions about this form, please contact the **APRA AMCOS Writer Services Team**.

Access levels:

Full Access

- Access to all areas of membership information, other than AGM voting
- View and update contact information
- Register works
- Create setlists
- Submit Performance Reports
- Review financial documentation, including Remittance, Statements and Earnings Insights
- Communicate with APRA AMCOS on all queries and issues related to the Members Membership
- As a full access role has been granted permission to operate on behalf of the member, they can add all access types for other representatives, including 'Full Access'.
- 'Full Access' roles **cannot** remove or edit another 'Full Access' roles permissions or details once added. In order to remove or update, they must contact an APRA AMCOS representative and the request will be assessed.
- 'Full Access' roles **can** remove and edit 'Claim and Register' and 'Financial' roles.

Claim & Register

- Register works and access to upload works that are used in advertisements on radio or tv
- Create setlists
- Submit Performance Reports
- Communicate with APRA AMCOS on all queries and issues related to the registering/registered works, setlists or claims

Financial

- Review financial documentation, including Remittance, Statements and Earnings Insights
- Communicate with APRA AMCOS on all queries and issues related to the Members pending or received income and/or financial documentation.

Member name

Member email

Member number or IPI number

If supplied by an Authorised Representative

Name of Authorised person

Contact Email

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Representative 1

Name of representative to be authorised

Business role (EG Manager, Accountant.etc)

Email

Phone Number

Address

Type of access

- ☐ Full access
☐ Claim & Register
☐ Financial

I authorise the following access to the above named:

Communication

☐ Please continue sending correspondence to the APRA AMCOS member

or

☐ Please no longer send correspondence related to APRA AMCOS to the member, the above listed authorised representative can make enquiries on behalf of the member in relation to their area of access.

This authority shall remain current until ceased by the member or appropriate Authorised representative in writing or via the Member Portal

Privacy Policy

Please read APRA AMCOS' Privacy Policy - www.apraamcos.co.nz/privacy

☐ I have read and accept the terms of APRA AMCOS' Privacy Policy and consent to the handling of my personal information as described in those terms.

Member/Authorised person signature:

Date:

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Representative 2

Name of representative to be authorised

Business role (EG Manager, Accountant.etc)

Email

Phone Number

Address

Type of access

- ☐ Full access
☐ Claim & Register
☐ Financial

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Member/Authorised person signature:

Date: