

**WORK-RELATED TRAGEDY - ADVOCACY
AUTHORITY FOR WORKPLACE TRAGEDY INC. TO
ADVOCATE ON MY/OUR BEHALF**

TO WHOM IT MAY CONCERN

I / We
(Family Member's Full Name)

Of.....
(Address)

a representatives of the family of

who died as a result of a work-related incident in NSW, hereby:

1. **APPOINT** Workplace Tragedy Inc., including its lawful servants, agents and nominees, to act on my/our behalf in relation to the above work-related death; and
2. **AUTHORISE** Workplace Tragedy Inc to make, send and receive any form of communication (including but not necessarily limited to written, verbal, and electronic) that I/we could lawfully make, send and receive myself/ourselves in relation to these matter/s; and
3. **AUTHORISE** Workplace Tragedy Inc to refer my/our matter to the relevant authorities if indicated in the circumstances
4. **AUTHORISE** this authority to continue until this/these matter/s has/have been finalised according to law and/or continue until our requirements have been satisfied.
5. **REQUIRE** Workplace Tragedy Inc. to provide ongoing full reports in regards to the matters relating to the work-related death
6. This Authority is given strictly on the basis that Workplace Tragedy Inc., will conduct all liaison, discussions, correspondence etc. on our behalf as a free service.

Signed:

Date:

Contact telephone No. :

Email:.....